

APPLICATION NO.	
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RECEIPT NO.	FEE RECEIVED
CARD	OTHER
KIRKLEES COUNCIL VALIDATION CHECKLIST	SUPPLY 1 COPY (PLUS THE ORIGINAL)

PLANNING - PO Box B93, Civic Centre 3, Huddersfield, HD1 2JR **Tel:** 01484 414746 **E-mail :** dc.admin@kirklees.gov.uk

Application for approval of reserved matters following outline approval. Town and Country Planning (Development Management Procedure) (England) Order 2015

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

1. Applicant Name, Address and Contact Details

Title:	<input type="text"/>	First Name:	<input type="text"/>	Surname:	<input type="text" value="-"/>
Company name:	<input type="text" value="Seddon Homes Limited"/>				
Street address:	<input type="text" value="C/O Agent"/>				
	<input type="text"/>				
	<input type="text"/>				
Town/City:	<input type="text"/>				
Country:	<input type="text"/>				
Postcode:	<input type="text"/>				
Are you an agent acting on behalf of the applicant?				<input checked="" type="radio"/> Yes <input type="radio"/> No	

2. Agent Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Robert"/>	Surname:	<input type="text" value="Harding"/>
Company name:	<input type="text" value="Lichfields"/>				
Street address:	<input type="text" value="3rd Floor"/>				
	<input type="text" value="15 St Paul's Street"/>				
	<input type="text"/>				
Town/City:	<input type="text" value="Leeds"/>				
Country:	<input type="text"/>				
Postcode:	<input type="text" value="LS1 2JG"/>				
	<input type="text"/>				
	<input type="text"/>				
	<input type="text" value="01133971397"/>				
	<input type="text"/>				
	<input type="text"/>				
	<input type="text" value="robert.harding@lichfields.uk"/>				

3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House: Suffix:

House name:

Street address:

Town/City:

Postcode:

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:

Northing:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

Discussions with officers to confirm the approach of the reserved matters application and advise on layout, appearance, scale and landscaping of the detailed layout. See accompanying Planning Statement.

5. Development Description

Please indicate all those reserved matters for which approval is being sought:

Access Appearance Landscaping Layout Scale

Please provide a description of the reserved matters for which you are seeking consent. Please state if the outline planning application was an environment impact assessment application and, if so, confirm that an environmental statement was submitted to the planning authority at that time.

OUTLINE APPLICATION FOR ERECTION OF 56 DWELLINGS AND CARE HOME WITH ASSOCIATED CAR PARKING

Reference number: Date of application decision:

Please provide a description of the reserved matters for which you are seeking consent:

Please see Application Covering Letter and accompanying Planning Statement

Has the development already started? Yes No

6. Authority Employee/Member

With respect to the Authority, I am:

- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you? Yes No

7. Supporting Information

Please provide the following information:

Please list (with reference numbers) all relevant drawings that were approved as part of the original decision:

N/A

Please list all drawing numbers submitted with this application for approval:

See Annex 1 of application Covering Letter

If applicable, please state the reasons for any changes to the original drawings:

N/A

8. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

The agent The applicant Other person

9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.



Date

11/05/2018