

|                                          |                                   |
|------------------------------------------|-----------------------------------|
| APPLICATION NO.                          |                                   |
| DATE LODGED                              |                                   |
| RECEIPT NO.                              | FEE RECEIVED                      |
| CARD                                     | OTHER                             |
| KIRKLEES COUNCIL<br>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](mailto:dc.admin@kirklees.gov.uk)

Application for approval of details reserved by condition.  
Town and Country Planning Act 1990  
Planning (Listed Buildings and Conservation Areas) Act 1990

**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. Site Address**

|                                                                          |                                                 |
|--------------------------------------------------------------------------|-------------------------------------------------|
| Number                                                                   | <input type="text"/>                            |
| Suffix                                                                   | <input type="text"/>                            |
| Property name                                                            | <input type="text" value="31-37"/>              |
| Address line 1                                                           | <input type="text" value="Beast Market"/>       |
| Address line 2                                                           | <input type="text" value=" &amp; 1 Southgate"/> |
| Address line 3                                                           | <input type="text"/>                            |
| Town/city                                                                | <input type="text" value="Huddersfield"/>       |
| Postcode                                                                 | <input type="text" value="HD1 1QF"/>            |
| Description of site location must be completed if postcode is not known: |                                                 |
| Easting (x)                                                              | <input type="text" value="414686"/>             |
| Northing (y)                                                             | <input type="text" value="416799"/>             |
| Description                                                              | <input type="text"/>                            |

**2. Applicant Details**

|                |                                                    |
|----------------|----------------------------------------------------|
| Title          | <input type="text"/>                               |
| First name     | <input type="text"/>                               |
| Surname        | <input type="text" value="Horizon Accommodation"/> |
| Company name   | <input type="text"/>                               |
| Address line 1 | <input type="text" value="c/o Agent"/>             |
| Address line 2 | <input type="text"/>                               |
| Address line 3 | <input type="text"/>                               |
| Town/city      | <input type="text"/>                               |

2. Applicant Details

|                  |  |
|------------------|--|
| Country          |  |
| Postcode         |  |
| Primary number   |  |
| Secondary number |  |
| Fax number       |  |
| Email address    |  |

Are you an agent acting on behalf of the applicant? ☒ Yes ☐ No

3. Agent Details

|                  |                           |
|------------------|---------------------------|
| Title            | Mr                        |
| First name       | David                     |
| Surname          | Storrie                   |
| Company name     | D5 Planning               |
| Address line 1   | Suite 1, Wellington House |
| Address line 2   | Lincoln Street            |
| Address line 3   |                           |
| Town/city        | Huddersfield              |
| Country          | United Kingdom            |
| Postcode         | HD1 6RX                   |
| Primary number   |                           |
| Secondary number |                           |
| Fax number       |                           |
| Email            |                           |

4. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

Alterations to convert Hotel (C1) to 10 Student Studios

Reference number

2018/62/94181/W

|                                                            |            |
|------------------------------------------------------------|------------|
| Date of decision (date must be pre-application submission) | 19/07/2019 |
|------------------------------------------------------------|------------|

Please state the condition number(s) to which this application relates

Condition number(s)

Condition 4 -Ventilation  
Condition 7 - Parking Management

#### 4. Description of the Proposal

Has the development already started?

☐ Yes ☒ No

#### 5. Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

☐ Yes ☒ No

#### 6. Discharge of Conditions

Please provide a full description and/or list of the materials/details that are being submitted for approval

Condition 4 - Ventilation. Discussions have taken place with Environmental Protection on the proposed ventilation system that has been used in the applicant's other student schemes within the town centre.  
Condition 7 - Car Park Management Plan - see attached report.

#### 7. 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?

- ☒ The agent  
☐ The applicant  
☐ Other person

#### 8. 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 (Must be pre-application submission)

Details of the pre-application advice received

#### 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 (cannot be pre-application)