APPLICATION NO.	
DATE LODGED	
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 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	
Suffix	
Property name	
Address line 1	
Address line 2	
Address line 3	
Town/city	
Postcode	

Description of site location must be completed if postcode is not known:

Easting (x)	414956
Northing (y)	419188

Description

LAND WEST OF, ASHBROW INFANT AND NURSERY SCHOOL, ASHBROW ROAD, ASHBROW, HUDDERSFIELD

2. Applicant Details

Title	Mr
First name	Hugh
Surname	Sterndale-Smith
Company name	Keepmoat Homes
Address line 1	Keepmoat Homes
Address line 2	
Address line 3	
Town/city	Leeds

2. Applicant Details

Country	
Postcode	LS12 6AN
Primary number	
Secondary number	
Fax number	
Email address	

Are you an agent acting on behalf of the applicant? ○ Yes ◉ No

3. Agent Details

No Agent details were submitted for this application

4. Description of the Proposal

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

ERECTION OF 161 RESIDENTIAL UNITS INCLUDING A 50 UNIT EXTRA CARE FACILITY (ALL CLASS C3) AND PUBLIC OPEN SPACE

Reference number

2019/62/92940/W

Date of decision (date must be pre-application submission) 17/02/2020

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

Condition number(s)

4, 5, 6, 9, 10, 11, 12, 13, 14, 15, 19, 20, 22

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

Cond 4 - CEMP
Cond 5 - Construction Management Plan & Statement
Cond 9 - Temporary Surface Water Drainage Plan
Cond 10 & 11 - S104 & Drainage Details
Cond 12 & 13 - S38 & Road Safety Audit
Cond 14 - Retaining Wall Details
Cond 15 - LEMP
Cond 19 - Detailed Design of public path link
Cond 20 - Detailed Design of PROW improvements + Surface Treatment Plan
Cond 22 - Landscape Phasing Plan

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?

7. Site Visit

- ○ 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)	18/02/2020