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3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:	33	House suffix:	
House name:					
Address 1:	INGBIRCH WORTH ROAD				
Address 2:					
Address 3:					
Town:	THURLSTONE				
County:	SOUTH YORKSHIRE				
Postcode (optional):	S36 9QN				
Description of location or a grid reference. (must be completed if postcode is not known):					
Easting:		Northing:			
Description:					

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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Laura Bennett nee Bibby

Reference:

2013/0089

Date (DD/MM/YYYY):

(must be pre-application submission)

Jan 2014

Details of pre-application advice received?

Design advice.

5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

Change of use and extension to existing stables + garage to residential unit
(C3) Resubmission due to amended design & layout

Reference number: 2014/0119

Date of decision: 24-3-2014

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

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

1.	Development begun before expiration of 3 years from date of permission	6.	Foul drain runs shown on plan and connect to existing foul drain on site.
2.	Carried out strictly in accordance with plans received 29 January 2014	7.	S.W drain to soakaway min 5m from dwelling subject to satisfactory percolation test to approval of B.C.O. on site.
3.	coarse stone to match existing	8.	
4.	parking & manoeuvring facilities surfaced in solid bound material.	9.	
5.	Work to be carried out between 0800 to 1800 Mon to Fri and 0800 to 1400 on Saturdays.	10.	

Has the development already started?

☒ Yes ☐ No

If Yes, please state when the development started (DD/MM/YYYY):

June 2016

(date must be pre-application submission)

Has the development been completed?

☐ Yes ☒ No

If Yes, please state when the development was completed (DD/MM/YYYY):

(date must be pre-application submission)

6. Discharge Of Condition

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

Matching coursed stone & matching stone heads & cills.

7. Part Discharge Of Condition(s)

Are you seeking to discharge only part of a condition?

☐ Yes ☒ No

If Yes, please indicate which part of the condition your application relates to:

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8. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.

The original and 3 copies* of a completed and dated application form: ☒

The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application: ☒

*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.

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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

20-1-2022.

(date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

11. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

12. 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)

☐ Agent

☒ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: