

Hodgson , Andrea

From: Smith , Matthew
Sent: 14 November 2016 16:05
To: Hodgson , Andrea
Subject: FW: Wombwell Chapel Conversion Condition 5
Attachments: 07-1-16-1-1085_Draft Travel Plan Condition 5.pdf; Planning Forms Release of Condition 5.pdf; RE: Wombwell Chapel Conversion Condition 5

Importance: High

Andrea,

See below. Was this discharge of conditions enquiry made up? I can't see it on the system and can't remember it coming through. If not could it be made up in to one as soon as possible and passed through to me.

Matthew

Matthew Smith
Group Leader (Outer Team)
Development Management
Barnsley MBC
Planning and Transportation
PO Box 604
Barnsley
South Yorks
S70 9FE
Tel: 01226 772583

From: Smith , Matthew
Sent: 17 October 2016 14:57
To: Hodgson , Andrea
Subject: FW: Wombwell Chapel Conversion Condition 5

Andrea,

Could the attached be registered as a discharge of conditions application in the usual manner and then passed through to me to check over.

Matthew

Matthew Smith
Group Leader (Outer Team)
Development Management
Barnsley MBC
Planning and Transportation
PO Box 604
Barnsley
South Yorks
S70 9FE
Tel: 01226 772583

From: Lilley , Sean
Sent: 13 October 2016 15:06
To: Smith , Matthew
Cc: 'Mike Bretton'; Devonport , Anthony
Subject: Wombwell Chapel Conversion Condition 5

Matthew,

Apologies for the delay please see attached a draft travel plan and associated forms for release of condition 5.

Cost code for the fee of £97 I believe is the same as the original planning application fee.

I will get confirmation from the client and get back to you.

Best regards

Sean B Lilley **BSc MCIAT**
Chartered Architectural Technologist
NPS Group Barnsley

T: 01226 774387 **E:** Sean.Lilley@nps.co.uk
NPS Group
Gateway Plaza
Sackville Street
Barnsley
South Yorkshire
S70 2RD

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	MR	First name:	ANTHONY		
Last name:	DEVONPORT				
Company (optional):	BMBC BELLEVUE				
Unit:		House number:		House suffix:	
House name:	WESTGATE, LEVEL 3				
Address 1:					
Address 2:					
Address 3:					
Town:	BARNSELEY				
County:	SOUTH YORKSHIRE				
Country:	ENGLAND				
Postcode:	S70 9FE				

2. Agent Name and Address

Title:	MR	First name:	SEAN		
Last name:	LILLEY				
Company (optional):	NPS BARNSELEY				
Unit:		House number:		House suffix:	
House name:	GATEWAY PLAZA, LEVEL 5				
Address 1:	JACKVILLE STREET				
Address 2:					
Address 3:					
Town:	BARNSELEY				
County:	SOUTH YORKSHIRE				
Country:	ENGLAND				
Postcode:	S70 2RD				

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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:

Reference:

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

Details of pre-application advice received?

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:

Reference number:

Date of decision:

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

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

1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.	TRAVEL PLAN	10.	

Has the development already started?

☐ Yes ☒ No

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

(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:

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:

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 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: ☒

The correct fee: ☒

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:

S. H. H. H.

Date (DD/MM/YYYY):

13.10.2016

(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):

JEAN. LILLET @ NIS - C.E. - UK

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:

RAY MANGAM

Telephone number:

07971559642

Email address: