



Arun Civic Centre  
Matravers Road  
Littlehampton  
West Sussex BN17 5LF  
Tel: 01903 737755  
[www.arun.gov.uk](http://www.arun.gov.uk)

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.

|                                                                                                                   |                                              |             |                               |                   |                               |
|-------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------|-------------------------------|-------------------|-------------------------------|
| Title:                                                                                                            | <input type="text" value="Mr"/>              | First name: | <input type="text" value=""/> | Surname:          | <input type="text" value=""/> |
| Company name:                                                                                                     | <input type="text" value="Fargro Limited"/>  |             |                               |                   |                               |
| Street address:                                                                                                   | <input type="text" value="Toddington Lane"/> |             |                               | Country Code      | <input type="text" value=""/> |
|                                                                                                                   | <input type="text" value=""/>                |             |                               | Telephone number: | <input type="text" value=""/> |
|                                                                                                                   | <input type="text" value=""/>                |             |                               | Mobile number:    | <input type="text" value=""/> |
| Town/City                                                                                                         | <input type="text" value="Littlehampton"/>   |             |                               | Fax number:       | <input type="text" value=""/> |
| County:                                                                                                           | <input type="text" value="West Sussex"/>     |             |                               |                   | <input type="text" value=""/> |
| Country:                                                                                                          | <input type="text" value="United Kingdom"/>  |             |                               | Email address:    | <input type="text" value=""/> |
| Postcode:                                                                                                         | <input type="text" value="BN17 7PP"/>        |             |                               |                   | <input type="text" value=""/> |
| Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No |                                              |             |                               |                   |                               |

|                 |                             |             |                   |              |                 |
|-----------------|-----------------------------|-------------|-------------------|--------------|-----------------|
| Title:          | Mr                          | First Name: | Ben               | Surname:     | Harvey          |
| Company name:   | Liam Russell Architects Ltd |             |                   |              |                 |
| Street address: | 3                           |             | Telephone number: | Country Code | National Number |
|                 | Broad Reach Mews            |             |                   |              |                 |
|                 | Ropetackle                  |             | Mobile number:    |              |                 |
| Town/City       | Shoreham-by-sea             |             | Fax number:       |              |                 |
| County:         | West Sussex                 |             | Email address:    |              |                 |
| Country:        | United Kingdom              |             |                   |              |                 |
| Postcode:       | BN43 5EY                    |             |                   |              |                 |

A/139/14/DOC

Application for approval of details reserved by conditions 2, 18, 20, 25, 28 & 35 imposed under reference A/74/13 - relating to external appearance, landscaping scheme, external lighting, site investigation, proposed foul water drainage

### 3. Site Address Details

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

Description:

|                 |                      |         |                      |
|-----------------|----------------------|---------|----------------------|
| House:          | <input type="text"/> | Suffix: | <input type="text"/> |
| House name:     | <input type="text"/> |         |                      |
| Street address: | <input type="text"/> |         |                      |
|                 | <input type="text"/> |         |                      |
| Town/City:      | <input type="text"/> |         |                      |
| County:         | <input type="text"/> |         |                      |
| Postcode:       | <input type="text"/> |         |                      |

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

|           |                      |
|-----------|----------------------|
| Easting:  | <input type="text"/> |
| Northing: | <input type="text"/> |

### 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:             | <input type="text"/> | First name: | <input type="text"/> | Surname: | <input type="text"/> |
| Reference:         | <input type="text"/> |             |                      |          |                      |
| Date (DD/MM/YYYY): | <input type="text"/> |             |                      |          |                      |

Details of the pre-application advice received:

|                      |
|----------------------|
| <input type="text"/> |
|----------------------|

### 5. Description of Proposal

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

PROPOSED DISTRIBUTION WAREHOUSE AND COVERED STORAGE, TRADE COUNTER AND ASSOCIATED OFFICES. UPGRADING OF ACCESS ROAD AND IMPROVEMENT OF EXISTING JUNCTION WITH THE A27. THIS APPLICATION IS A DEPARTURE FROM THE DEVELOPMENT PLAN AND EFFECTS A PUBLIC RIGHT OF WAY.

|                               |                      |                   |                      |
|-------------------------------|----------------------|-------------------|----------------------|
| Application reference number: | <input type="text"/> | Date of decision: | <input type="text"/> |
|-------------------------------|----------------------|-------------------|----------------------|

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

Condition number(s).

2,18,25,28,35

Has the development already started? ☐ Yes ☒ No

### 6. Discharge of Condition(s)

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

CONDITION 2 - EXTERNAL MATERIALS  
CONDITION 18 - LANDSCAPING SCHEME  
CONDITION 25 - SITE INVESTIGATION  
CONDITION 28 - PROPOSED FOUL WATER DRAINAGE  
(SUBMISSION DOCUMENTS REFERENCE THE RELEVANT CONDITION)

### 7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition?

☐ Yes ☒ No

### 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

16/09/2014