ARUN
DISTRICT COUNCIL

ARUN DISTRICT COUNCIL
No. FG 116 08

Received

Arun Civic Centre
Maltravers Road
Littlehampton
West Sussex
BN17 5LF
Tel: 01903 737756

www.arun.gov.uk

Application for approval of reserved matters following outline approval.

Article 21, Town and Country Planning (General Development Procedure) Order 1995

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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:	
First name:	
Last name:	
Company (optional):	GLOBE ESTATES
Unit:	
House number:	
House suffix:	
House name:	
Address 1:	311 GOLDEN ROAD
Address 2:	WORTHING
Address 3:	
Town:	
County:	WEST SUSSEX
Country:	
Postcode:	BN12 4HX

2. Agent Name and Address

Title:	
First name:	
Last name:	
Company (optional):	RJC ARCHITECTS
Unit:	
House number:	
House suffix:	
House name:	LIME KILN BARN
Address 1:	COLWORTH
Address 2:	
Address 3:	
Town:	CHICHESTER
County:	WEST SUSSEX
Country:	
Postcode:	PO20 2DS

3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: | House suffix:

House name:

Address 1: Site to rear of

Address 2: 120 FELLING STREET

Address 3:

Town: FELLING

County: WEST SUSSEX

Postcode (optional): BN12

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 ☒ N

If Yes, please complete the following information about the ad 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. Development Description

Please indicate which reserved matter(s) you require to be determined under this application:

☐ Access ☒ Appearance ☒ Landscaping ☐ Layout ☒ Scale

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

DEMOLITION OF EXISTING GARAGE AND CONSTRUCTION OF TWO BEDROOM DETACHED BUNGALOW APPLICATION N° FG/28/07

Reference number: FG/28/07 Date of decision: 08/05/07 (date must be pre-application submission) (DD/MM/YYYY)

Please provide a description of the reserved matters for which you are seeking consent:

APPEARANCE
LANDSCAPING
SCALE

Has the development already started? ☐ Yes ☒ No

If Yes, please state when the development was started (DD/MM/YYYY): N/A (date must be pre-application submission)

Has the work been completed? ☐ Yes ☒ No

If Yes, please state when the development was completed (DD/MM/YYYY): N/A (date must be pre-application submission)

6. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☒ No

If Yes, please provide details:

7. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council? ☐ Yes ☒ No

If Yes, please provide details:

8. Supporting Information

Please provide the following information:

List of all relevant drawings, including reference numbers, that were approved as part of the original decision:

Drawing	Reference Number
PROPOSED PLANS	06/0347/3

List of drawing numbers submitted with this application for approval:

Drawing Number
08/24/01
08/24/02

Reasons for any changes to the original drawings (if applicable):

9. 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 correct fee: ☒

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

The original and 3 copies of such plans and drawings as are necessary to deal with the matters reserved in the outline planning permission. ☒

10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

[redacted]

