



LU/367/13/DOC

Arun Civic Centre  
Maltravers Road  
Littlehampton  
West Sussex BN17 5LF  
Tel: 01903 737756  
[www.arun.gov.uk](http://www.arun.gov.uk)

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](http://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:   | MALCOLM |
| Last name:          | WESTCOTT          |               |         |
| Company (optional): | BARRATT HOMES     |               |         |
| Unit:               |                   | House number: |         |
| House name:         | BARRATT HOUSE     |               |         |
| Address 1:          | WALNUT TREE CLOSE |               |         |
| Address 2:          |                   |               |         |
| Address 3:          |                   |               |         |
| Town:               | GUILDFORD         |               |         |
| County:             | SURREY            |               |         |
| Country:            |                   |               |         |
| Postcode:           | GU                |               |         |

#### 2. Agent Name and Address

|                     |                    |               |      |
|---------------------|--------------------|---------------|------|
| Title:              | MR                 | First name:   | MIKE |
| Last name:          | CHRISTMAS          |               |      |
| Company (optional): | WYG TRENCH FARROW  |               |      |
| Unit:               |                    | House number: |      |
| House name:         |                    |               |      |
| Address 1:          | 42-45 PURE OFFICES |               |      |
| Address 2:          | KEMBREY PARK       |               |      |
| Address 3:          |                    |               |      |
| Town:               | SWINDON            |               |      |
| County:             | WILTSHIRE          |               |      |

Application for approval of details reserved by conditions 8 (surface water drainage) and 10 (foul water drainage) following a grant of planning permission LU/355/10/

### 3. Site Address Details

Please provide the full postal address of the application:

Unit:  House number:  Postcode:

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:

Courtwick Lane  
Land South of railway  
Littlehampton

ice

been sought from the local

ion? ☒ Yes ☐ No

LU/367/13/DOC

following information about the advice

lp the authority to deal with this

).

details are not

as much as possible:

☐

Officer name:

TOM CALLAWAY

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

ON GOING CORRESPONDENCE PROMPTED  
BY PREVIOUS APPLICATION LU/88/13

### 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:

OUTLINE PLANNING 600 UNITS REF: LU/355/10

Reference number:

LU/355/10

Date of decision:

23/03/2012

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

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

|    |                                      |     |  |
|----|--------------------------------------|-----|--|
| 1. | 8 - SURFACE WATER DRAINAGE - Ph1     | 6.  |  |
| 2. | 10 - FOUL WATER DRAINAGE - SITE WIDE | 7.  |  |
| 3. |                                      | 8.  |  |
| 4. |                                      | 9.  |  |
| 5. |                                      | 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:

SCHEDULE OF DRAWINGS APPENDED

### 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:

CONDITION 8 - RELATES ONLY TO AREA WITHIN GREEN LINE ON  
DRAWING 4485/175  
CONDITION 10 - RELATES TO ENTIRE DEVELOPMENT AREA.

### 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:

Date (DD/MM/YYYY):

19/12/2013

(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

### 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: