

Application for approval of details reserved by condition.  
Town and Country Planning Act 1990  
Planning (Listed Buildings and Conservation Areas) Act 1990

**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.

**1. Applicant Name, Address and Contact Details**

|                                                     |                                |             |  |                                      |                          |                 |                  |
|-----------------------------------------------------|--------------------------------|-------------|--|--------------------------------------|--------------------------|-----------------|------------------|
| Title:                                              | Mr                             | First name: |  | Surname:                             |                          |                 |                  |
| Company name:                                       | Barratt David Wilson Homes Ltd |             |  |                                      |                          |                 |                  |
| Street address:                                     | c/o Luken Beck                 |             |  | Telephone number:                    | Country Code             | National Number | Extension Number |
|                                                     |                                |             |  |                                      |                          |                 |                  |
| Town/City                                           |                                |             |  | Mobile number:                       |                          |                 |                  |
| County:                                             |                                |             |  | Fax number:                          |                          |                 |                  |
| Country:                                            | United Kingdom                 |             |  | Email address:                       |                          |                 |                  |
| Postcode:                                           |                                |             |  |                                      |                          |                 |                  |
| Are you an agent acting on behalf of the applicant? |                                |             |  | <input checked="" type="radio"/> Yes | <input type="radio"/> No |                 |                  |

**2. Agent Name, Address and Contact Details**

|                 |                     |             |       |                   |              |                 |                  |
|-----------------|---------------------|-------------|-------|-------------------|--------------|-----------------|------------------|
| Title:          | Mr                  | First Name: | Keith | Surname:          | Wheway       |                 |                  |
| Company name:   | Luken Beck          |             |       |                   |              |                 |                  |
| Street address: | 30 Carlton Crescent |             |       | Telephone number: | Country Code | National Number | Extension Number |
|                 |                     |             |       |                   |              |                 |                  |
| Town/City       | Southampton         |             |       | Mobile number:    |              |                 |                  |
| County:         | Hampshire           |             |       | Fax number:       |              |                 |                  |
| Country:        | United Kingdom      |             |       | Email address:    |              |                 |                  |
| Postcode:       | SO15 2EW            |             |       |                   |              |                 |                  |

### 3. Site Address Details

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

|                 |                                           |         |                      |
|-----------------|-------------------------------------------|---------|----------------------|
| House:          | <input type="text"/>                      | Suffix: | <input type="text"/> |
| House name:     | <input type="text" value="Site 6"/>       |         |                      |
| Street address: | <input type="text" value="Felpham"/>      |         |                      |
| Town/City:      | <input type="text" value="Bognor Regis"/> |         |                      |
| County:         | <input type="text" value="West Sussex"/>  |         |                      |
| Postcode:       | <input type="text" value="PO22"/>         |         |                      |

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

|           |                                     |
|-----------|-------------------------------------|
| Easting:  | <input type="text" value="494910"/> |
| Northing: | <input type="text" value="102004"/> |

Description:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?



Yes



No

### 5. Description of Proposal

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

Reserved matters application pursuant to outline permission FP/92/04 Condition 1 (j) and (l) (part) relating to details of the sports changing facilities, layout of sports pitches, safety fencing.

Application reference number:

Date of decision:

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

Condition number(s):

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:

Stage 1/2 Safety Audit, plan of access and proposed road with drainage details.

### 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