

Planning Group

South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

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

'ublication 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 luthority'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		2. Agent Name and Address	
Title:	MRHIES First name: GARY and CLAIRE	Title:	DR First name: JAMES
Last name:	HIMPHREY	Last name:	MARTIN
Company (optional):		Company (optional):	J MARTIN ARCHITECT
Unit:	House number: 17 House suffix:	Unit:	House number: \2 House suffix:
House name:		House name:	
Address 1:	DEAN ROAD	Address 1:	MARSDEN ROAD
Address 2:		Address 2:	
Address 3:		Address 3:	р
Town:	SOUTH SHIELDS	Town:	SOUTH SHIELDS
County:		County:	
Country:		Country:	DE34 6DF
Postcode:	NE33 3P3	Postcode:	DE34 6DF
Sangton de la conferencia del la conferencia del la conferencia del la conferencia de la conferencia de la conferencia del la			10 800 701.

ST0799/15CONDAREAPLANNING

provide the full postal address of the application site. House number: 17 House suffix: House number: 17 House suffix: Address 1: DEAN ROAD Address 2: Address 3: Fown: South Sheeps Sheeps South Sheeps Sheeps South Sheeps Sheeps South Sheeps S	## A. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes			
	ADEL DI LINING			
5. Description Of Your Proposal	n on the decision letter, including the application reference number			
CHANGE OF USE FROM PAIRDRESSER TO TEARDOW INSERTION OF 3 NO. CONSERVATION REOFLIGHTS FIRST FLOOR EXTENSION TO REAR OFFSHOOT Reference number: ST/1189/13 FUL Date of decision: Please state the condition number(s) to which this application related	(Date must be pre-application submission) (DD/MM/YYYY)			
1.	6.			
2.	7.			
3. a),b),c).	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?				
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)				
Discharge Of Condition				
 Discharge Of Condition Please provide a full description and/or list of the materials/details to 	that are being submitted for approval:			
1. BRICK - CLAYBURY CIVIC 3. STONE - PANDON RUBBLE SANDSTONE 2. ROOF - Welfon Statis A. WINDOWS - HARDCOOD SUDING SASH, AS EXISTING				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:				

read the following checklist to make sure you have sent all the ormation required will result in your application being deemed in the Local Planning Authority has been submitted.	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by		
The original and 3 copies of a completed and dated application form:	original and 3 copies of other plans and drawings aformation necessary to describe the subject of the application:		
The correct fee:			
7. Declaration /we hereby apply for planning permission/consent as described in the nformation. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	rfacts stated are true and accurate and any opinions given are the		
Signed - Applicant:	Or signed - Agent: ,		
Date (DD/MM/YYYY): 6 AUGUST 10(5) (date cannot be pre-application)			
0. Applicant Contact Details	11. Agent Contact Details		
Country code: National number: Extension number: Country code: Mobile number (optional):	Telephone numbers Country code: National number: OIOI		
Country code: Fax number (optional): Email address (optional):	Country code: Fax number (optional): Email address (optional): drjames martin architectag mail. com		
2. Site Visit			
an the site be seen from a public road, public footpath, bridleway or the planning authority needs to make an appointment to carry ut a site visit, whom should they contact? (Please select only one) Other has been selected, please provide: Contact name:	other public land? Yes No Applicant Other (if different from the agent/applicant's details) Telephone number:		
mail address:			

