



London Borough of Hillingdon, Planning & Community Services, 3N Civic Centre, High Street, Uxbridge, Middlesex UB8 1UW
Tel: 01895 250230 Web: www.hillingdon.gov.uk

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.

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:	DR	First name:	BALVINDER	
Last name:	RAI			
Company (optional):				
Unit:		House number:	88	House suffix:
House name:				
Address 1:	BROADWOOD AVENUE			
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:	HA4 7XR			

2. Agent Name and Address

Title:	MR	First name:	AARON	
Last name:	RAI			
Company (optional):	AVON BUILDS			
Unit:		House number:	48	House suffix:
House name:				
Address 1:	SHERWOOD AVENUE			
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:	UB6 0PG			

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: **88** House suffix:

House name:

Address 1: **BROADWOOD AVENUE**

Address 2:

Address 3:

Town:

County:

Postcode (optional): **HA4 7XR**

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

Easting: Northing:

Description: **DETACHED RESIDENTIAL HOUSE**

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:

2 x two storey, 5 bedroom, detached dwelling houses with habitable roof space with associated parking and amenity space, involving demolition of existing house.

Reference number: **13396/APP/2019/2893**

Date of decision: **16/12/2019**

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

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

1. CONDITION 3	6.
2. CONDITION 4	7.
3. CONDITION 5	8.
4. CONDITION 9	9.
5. CONDITION 10	10.

Has the development already started?

Yes No

(date must be pre-application submission)

If Yes, please state when the development started (DD/MM/YYYY):

Has the development been completed?

Yes No

(date must be pre-application submission)

If Yes, please state when the development was completed (DD/MM/YYYY):

6. Discharge Of Condition

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

METHOD STATEMENT, SITE INSPECTION RECORD, MK30 ANS, LANDSCAPE A1 v2, CONDITION 5 WRITTEN DETAILS, ARB INDUCTION FORM, MATERIAL DETAIL, LEVEL THRESHOLD, DRAINAGE REPORT

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:

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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

20/03/2020

(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

Country code: National number: Extension number:

Country code: Mobile number (optional): 07384 115 829

Country code: Fax number (optional):

Email address (optional): AVONBUILDS @ EUROPE. COM

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:

AARON RAI

Telephone number:

07384 115 829

Email address:

AVONBUILDS @ EUROPE. COM