



London Borough of Hillingdon, Residents 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 (as amended); Planning (Listed Buildings and Conservation Areas) Act 1990 (as amended)

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.

Site Location

Disclaimer: We can only make recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

Number

15

Suffix

Property Name

Address Line 1

King Edwards Road

Address Line 2

Address Line 3

Hillingdon

Town/city

Ruislip

Postcode

HA4 7AE

Description of site location must be completed if postcode is not known:

Easting (x)

Northing (y)

509019

187357

Description

Applicant Details

Name/Company

Title

Mr

First name

Vishal

Surname

Mohal

Company Name

Address

Address line 1

15 King Edwards Road

Address line 2

Address line 3

Town/City

Ruislip

County

Hillingdon

Country

Postcode

HA4 7AE

Are you an agent acting on behalf of the applicant?

Yes
 No

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Agent Details

Name/Company

Title

Mr

First name

Sunil

Surname

Malhotra

Company Name

SKM Planning & Design

Address

Address line 1

52 Breakspear Road South

Address line 2

Ickenham

Address line 3

Town/City

Uxbridge

County

Country

Postcode

UB10 8HE

Contact Details

Primary number

***** REDACTED *****

Secondary number

Fax number

Email address

***** REDACTED *****

Description of the Proposal

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

Erection of two detached houses with dormers and integral garages, new crossovers and associated external works (involving demolition of the existing house)

Reference number

43419/APP/2014/3879

Date of decision (date must be pre-application submission)

26/01/2015

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

Condition number(s)

Condition 5
Condition 6

Has the development already started?

Yes
 No

If Yes, please state when the development was started (date must be pre-application submission)

01/05/2017

Has the development been completed?

Yes
 No

If Yes, please state when the development was completed (date must be pre-application submission)

01/06/2018

Part Discharge of Conditions

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

To demonstrate what trees were on-site before development, what trees were protected and retained and what trees were removed. Demonstrate how the planted trees appropriately mitigated the value lost by any tree removals in accordance with condition 5 of 43419/APP/2016/3197.

To submit appropriate enclosure/boundary treatment and finished levels/contour details to demonstrate how the development preserves and enhances the area's visual amenities in accordance with condition 6 of 43419/APP/2016/3197.

Discharge of Conditions

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

Discharge of Conditions Report ref. 001-REP-15KER-19.05.24-Rev.A

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?

The agent
 The applicant
 Other person

Pre-application Advice

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

Yes
 No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title

***** REDACTED *****

First Name

***** REDACTED *****

Surname

***** REDACTED *****

43419/APP/2023/47

Date (must be pre-application submission)

01/05/2024

Details of the pre-application advice received

To submit a formal application to discharge conditions 5 and 6

Declaration

I/We hereby apply for Approval of details reserved by a condition (discharge) as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of a public register and on the authority's website;
- Our system will automatically generate and send you emails in regard to the submission of this application.

I / We agree to the outlined declaration

Signed

Sunil Malhotra

Date

02/06/2024