HILLINGDON
LONDON
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

4395/APP/2009/1924.
Planning officer

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:	KAMAL
Last name:	RUPRAH.
Company (optional):	
Unit:	
House number:	110
House suffix:	
House name:	
Address 1:	ASHFORD AVENUE
Address 2:	
Address 3:	
Town:	HAYES
County:	MIDDX.
Country:	U.K.
Postcode:	UB4 0NB.

2. Agent Name and Address

Title:	MR.
First name:	BHUPINDER
Last name:	VIRDEE
Company (optional):	
Unit:	
House number:	78
House suffix:	
House name:	
Address 1:	WOODCROFT CRESCENT
Address 2:	
Address 3:	
Town:	HILLINGDON
County:	MIDDX.
Country:	U.K.
Postcode:	UB10 9JD.

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3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:	263	House suffix:	
House name:					
Address 1:	SWAKELEYS ROAD				
Address 2:					
Address 3:					
Town:	ICKENHAM				
County:	MIDDX.				
Postcode (optional):	UB10 8DR.				

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

Easting: Northing:

Description:

NEW PROPOSED DEVELOPMENT

4. 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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Reference:

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

Details of pre-application advice received?

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:

TWO STOREY 6-BEDROOM DETACHED DWELLING (INVOLVING DEMOLITION OF EXISTING BUNGALOW)
APP REF: 4395/APP/2009/1924. 13th NOV 2009.

Reference number: 4395/APP/2009/1924 Date of decision: 13th Nov 2009 (Date must be pre-application submission) (DD/MM/YYYY)

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

1.	CONDITION 2: BRICK SAMPLE, ROOF TILE & WINDOW.	6.	CONDITION 18: ALL SERVICES DISCONNECTED. NO TREES.
2.	CONDITION 5: SITE LEVELS	7.	
3.	CONDITION 6: DEMOLITION NOTE/TRAFFIC PLAN, DEMO CONTRACTOR.	8.	
4.	CONDITION 8: WINDOWS OBSURED AS SHOWN ON DRWG NR KR/04/110/111	9.	
5.	CONDITION 15: BASEMENT DETAILS.	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:

AS ABOVE ILLUSTRATED IN SECTION 5.

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: