

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

## Publication of applications on planning authority websites

lease 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. Applic	cant Name and Address	2. Agent Name and Address
Title:	MR First name: CHRLS	Title: MR First name: PHILIP
Last name:	MOLFENDEN	Last name: SEDDON
Company (optional):		Company (optional): PHILIPSEDDON ASSOCIATES
Unit:	House number: 232 House suffix:	Unit: House House suffix:
Flouse name:		House name: RIVINCTON
Address 1:	PRIORY ROAD	Address 1: NICHOLAS ROAD
Address 2:		Address 2: BLUNDELLSANDS
Address 3:		Address 3:
Town:	LIVERPOOL	Town: LIUCRPOOL
County:	MERJEJSIDE	County: MERSEYSIDE
Country:		Country:
Postcode:	L4 25L	Postcode: L23 GTS

number: 232 suffix:	House Library Library				
Internation	House Go House				
House   Frame:		authority about this application? Yes No			
Address 1: PRIORY ROAD  Address 2: Address 3: Town: LIUERPOOL County: MELSESSIDE Fostcode (optional): LIY 2 S.L. Description of location or a grid reference. (must be completed if postcode is not known): Easing: Northing:  Description:  S. 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:  TO ERECT MEN SHOP FOOD ARES REER AND RAUS EXISTING ERNOPY FUELOW OF DEPUTION OF EXISTING BULLING SIZEMAN OF SITE.  Reference number: 15 F   1802 Date of decision: 24   12   2   3   5    1. CONDITION S  8. 4  9. 5. 10.  Has the development already started?  If Yes, please state when the development started (DD/MM/YYY):  West pre-application submission)  (date must be pre-application submission)  Fives, please state when the development started (DD/MM/YYY):	House	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 2:  Address 3:  Town: LIUERPOOL County: MERSESSIDE Postcode (optional): LH 2SL Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description:  S. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference numbers and date of decision in the sections below.  To EEECT DEM STOP   Foo D SALES ACEN AND RAUS CALTING CANDRY FULL DIMPS; CRELT DEM STOP   Foo D SALES ACEN AND RAUS CALTING CANDRY FULL DIMPS; CRELT DEM STOP   Foo D SALES ACEN AND RAUS CALTING CANDRY FULL DIMPS; CRELT DEMENSION OF CALLING BULL DIMPS; CRELT D	Address 1: PRIORY ROAD	application more efficiently).			
Town: LIVERPOOL  County: MERSESSIDE  Postcode  Cost Code  Code (CD/MM/YYY):  (must be pre-application submission)  Details of pre-application submission)  Details of pre-application advice received?  S. Description:    Code Code  Completed if postcode is not known):    Code Code  Completed if postcode is not known):    Code Code  Completed if postcode is not known):    Code Code  Code  Code Code  Code  Code Code  Code	Address 2:				
County: MERSE 95 IDE  Postcode (optional): LH 25L Description of location or a grid reference. (must be completed if postcode is not known):  Easting: Northing: Description:    Northing: Description	Address 3:	Officer name:			
Date (DD/MM/YYY): (must be pre-application submission)   Details of pre-application advice received?	Town: LIVERPOOL	Reference:			
Coptional):   LH 23L   Description of location or a grid reference. (must be completed if postcode is not known):   Details of pre-application submission)   Details of pre-application reference number and date of decision in the sections below.   To ELECT NEW SHOP   FOR ALLS REPLACE   PETECT NEW SHOP   PROPERTY   PETECT   PETECT   DEMPS; ERECT NORKSHOP   TO REAR OF SITE.	County: MERSEYSIDE				
Description of location or a grid reference.  (must be completed if postcode is not known):  Easting:  Northing:  Description:    Description Of Your Proposal					
Easting: Northing: Description:    Description Of Your Proposal	Description of location or a grid reference.	11			
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:    To ERCIT NEW SHOP   FOOD SALES AREA AND RALSE EXISTINE CANOPY		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.  TO ERCIT NEW SITOP   FOOD SALES REER AND RAWS EXISTING CANOPY   FULLOWING DEMOLITION OF EXISTING BUILDINGS; REMOVE AND REPLACE   PETROL FUEL PUMPS; ERECT WORKSHOP TO REAR OF SITE.  Reference number: 15f   1802   Date of decision: 24   12   20   5   Please state the condition number(s) to which this application relates:  1. CONDITION \$ 6.  2. 7.  3. 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)  If Yes please state when the development was completed (DD/MM/YYYY):   Yes No    If Yes please state when the development was completed (DD/MM/YYYY):   Yes No    If Yes please state when the development was completed (DD/MM/YYYY):   Yes No    If Yes please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYYY):   Yes Please state when the development was completed (DD/MM/YYY):   Yes Please state when the development was co					
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Can Dition   Sales   Sales   Alen And Raise   Existing   Canopy					
To ERCCT NEW SHOP   foo D SALES AREA AND RAISE EXISTINE CANOPY following Demolition of Existine Buildings; Remove And Replace   PETROL FUEL PUMPS; ERECT WORKSHOP TO REAR OF SITE.   Reference number:   15f   1802   Date of decision:   24   12   2015   Submission) (DD/MM/YYYY)   Please state the condition number(s) to which this application relates:   1.   Condition of Existing Submission   CD/MM/YYYY)   Submission   CD/MM/YYYY)   3.   8.   8.   9.   9.     5.   10.     Yes   No   No   (date must be pre-application submission)   If Yes, please state when the development started (DD/MM/YYYY):   Yes   No   (date must be pre-application submission)  If Yes please state when the development was completed (DD/MM/YYYY):   (date must be pre-application   Yes   No   Yes   No   No   Yes   No   Yes   No   Yes	Please provide a description of the approved development as show and date of decision in the sections below:	n on the decision letter, including the application reference number			
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2. 7. 3. 8. 4. 9. 5. 10. Has the development already started? Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)  Has the development been completed? Yes please state when the development was completed (DD/MM/YYYY): (date must be pre-application)					
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If Yes, please state when the development was completed (DD/MM/VVVV) (date must be pre-application					
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
	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:					
ENVIRONMENTAL ASSESSMENT					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition?	7. Part Discharge Of Condition(s)				
If Yes, please indicate which part of the condition vous application relates to:	Are you seeking to discharge only part of a condition?	Yes V No			
if Yes, please Indicate which part of the condition your application relates to:	• • • • • • • • • • • • • • • • • • • •	Yes  No			

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:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:			
The correct fee:				
Jeclaration   Jeclaration				
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):			
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)  If Other has been selected, please provide:  Contact name:  Telephone number:				