

If you need help or advice please telephone -  
 During office hours only  
 8.30 am - 5 pm Mon-Thurs  
 8.30 am - 4.30 pm Fri

# Planning Application Part 1



# West Berkshire COUNCIL

Council Offices Market Street Newbury RG14 5LD  
 Tel: 01635 519111 Fax: 01635 519408  
 Document Exchange: DX 30825 Newbury

## Application for Permission to carry out development - Town and Country Planning Acts. Please refer to the Guidance Notes.

Please answer all questions in **BLOCK LETTERS**. If a question is not applicable, answer N/A. Please send **six\*** copies of this form and supporting plans, drawings and photographs to Planning at West Berkshire District Council.

\*Please submit at least eight copies for any Major Planning Application

For Office Use Only

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| 1. | <p><b>WEST BERKSHIRE DISTRICT COUNCIL</b><br/> <b>03 NOV 2006</b><br/> <b>PLANNING AND TRANSPORT STRATEGY</b></p> <p>Applicant's Name: Ministry of Defence<br/>         Address: c/o Defence Estates Aldershot<br/>         Postcode: _____ Telephone: _____</p>   |  |
| 2. | <p>If the applicant has an agent, all correspondence will be sent to the agent:<br/>         Agent's Name: _____<br/>         Address: _____<br/>         Contact Name: _____</p>  | <p>Defence Estates Operations South<br/>         Blandford House, Farnborough Road, Aldershot GU11 2HA<br/>         Telephone: 01252 361931<br/>         D E Jones</p>   |
| 3. | <p>Show the site outlined in red on the plans.<br/>         Any other land you own must be outlined in blue<br/>         Site Address or Location: _____</p>   | <p>AWE Aldermaston Burghfield Road RG7 4PR</p>   |
| 4. | <p>hectares or part Site Area: 0.11</p>  |  |
| 5. | <p>Description of proposed development Proposal: Erection of two Modular Buildings for Office Accommodation – Reserved Matters</p>   |  |
| 6. | <p>Does the application involve any of the following?<br/>         Tick as appropriate</p>   | <p>New Building <input checked="" type="checkbox"/> Redevelopment <input type="checkbox"/><br/>         Demolition <input type="checkbox"/> Change of Use <input type="checkbox"/><br/>         Alteration or Extension <input type="checkbox"/></p> |
| 7. | <p>What type of Application is this?<br/>         Tick one box only</p> <p>Outline Application <input type="checkbox"/><br/>         Full Application <input type="checkbox"/><br/>         Approval of details <input checked="" type="checkbox"/> State relevant outline reference 05/01646/OUT<br/>         Temporary permission <input type="checkbox"/> State period required <input type="text"/><br/>         Variation or removal of condition <input type="checkbox"/> State application reference <input type="text"/></p> <p>Please amplify your application in a covering letter</p> |  |
| 8. | <p>For Outline Applications state which details, if any, are to be considered as part of the application?</p> <p>Appearance <input type="checkbox"/> Layout <input type="checkbox"/><br/>         Access <input type="checkbox"/> Scale <input type="checkbox"/><br/>         Landscaping <input type="checkbox"/></p>   |  |