Llywodraeth Cymru
Welsh Government

If you would rather make this application online, you can do so on the Welsh Government website: www.gov.wales/planningapplications

Application for approval of details reserved by condition.
Town and Country Planning Act 1990
Planning (Listed Buildings and Conservation Areas) Act 1990

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Welsh Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and other relevant items of primary and subordinate legislation.

Please be aware that once you have downloaded this form, Planning Portal and Welsh Government will have no access to the form of the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Planning Service
16 Lord Street
Wrexham LL11 1LG

Telephone: 01978 298994
E-mail: planning@wrexham.gov.uk
Web: www.wrexham.gov.uk/planning

wrexham
COUNTY BOROUGH COUNCIL
CYNGOR BWRDEISTREF SIROL
wrecsam

Y Gwasanaeth Cynllunio
16 Stryt yr Arglwydd
Wrecsam LL11 1LG

Llinell Gymorth: 01978 298994
E-bost: planning@wrexham.gov.uk
Gwe: www.wrexham.gov.uk/planning

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	MRS
First name:	JAN
Last name:	WILLIAMS
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	BRYN TIRION
Address 1:	PEN-Y-CRAIG
Address 2:	FRONCYSYLLTE
Address 3:	
Town:	
County:	
Country:	WALES
Postcode:	LL 20 7RT

2. Agent Name and Address

Title:	MR
First name:	GERRARD
Last name:	MARSHALL
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	ST. OSWALDS
Address 1:	NANT-Y-CAWS
Address 2:	MONDA
Address 3:	OS
Town:	OSWESTRY
County:	SHROPSHIRE
Country:	ENGLAND
Postcode:	SY10 9AP

3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: | House suffix:

House name: BRYN TIRION

Address 1: PEN-Y-CRAIG

Address 2: FRONCYSYLLTE

Town:

County:

Postcode (optional): LL20 7AT

If you cannot provide a postcode, the description of the 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".

Easting: | Northing:

Description:

4. Pre-application Advice

Has pre-application 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:

DEMOLITION OF RUIN FORMATION OF OFFICE STORE

Reference number: P/2024/0068 Date of decision: (Date must be pre-application submission) (DD/MM/YYYY)

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

1.	3	6.	
2.	9	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)

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:

METAL SHEETING AND RENDER

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:

9 AND 3

Version 2018

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: ☐ SEE YOUR FILE

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: ☐ (DONE ON PLANNING PORTAL)

9. Declaration

I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional information. I confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the persons giving them.

Signed - Applicant:

Or signed - Agent: [redacted]

Date (DD/MM/YYYY): 13/4/24 (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code: | National number: | Extension number:

Country code: | Mobile number (optional): [redacted]

Email address (optional):

11. Agent Contact Details

Telephone numbers

Country code: | National number: [redacted] | Extension number:

Country code: | Mobile number (optional):

Email address (optional): [redacted]

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: PLANNING PASSED

Contact name:

Telephone number:

Email address: