Llywodraeth Cymru
Welsh Government

Application for approval of details reserved by condition

Town and Country Planning Act 1990
Historic Environment (Wales) Act 2023

If printed, please complete using BLOCK CAPITALS and BLACK ink.

1. Applicant Name and Address

[redacted]

County:

Country:

Postcode: LL18 5TY

2. Agent Name and Address

Title:		First name:			
Last name:					
Company (optional):					
Unit:		House number:		House suffix:	
House name:					
Address 1:					
Address 2:					
Address 3:					
Town:					
County:					
Country:					
Postcode:					

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Mae'r ddogfen hon ar gael yn Gymraeg hefyd / This document is also available in Welsh
Rydym yn croesawu gohebiaeth a galwadau ffôn yn Gymraeg / We welcome correspondence and telephone calls in Welsh

3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:		House suffix:	

House name:	Land South of
Address 1:	Berse Road
Address 2:	Caego
Address 3:	Wrexham
Town:	
County:	
Postcode: (optional)	LL11 6TP

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”.

Easting:		Northing:	

Description:

CODI 47 ANNEDD AC ISADEILEDD CYSYLLTIEDIG / ERECTION OF 47 DWELLINGS AND ASSOCIATED INFRASTRUCTURE

4. Pre-application Advice

Has pre-application advice been sought from the local planning 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 possible: ☐

Officer name:

Reference:

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

Details of the 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:

CODI 47 ANNEDD AC ISADEILEDD CYSYLLTIEDIG / ERECTION OF 47 DWELLINGS AND ASSOCIATED INFRASTRUCTURE

Reference number: P/2023/0221

Date of decision (DD/MM/YYYY):
(Date must be pre-application submission) 30/10/2024

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

1.	4	6.	
2.	6	7.	
3.	8	8.	
4.	9	9.	
5.	10	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) 24.03.2025

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:

Information to be submitted to address condition.

Condition 4 - BRX-ENA-XX-XX-DR-C-5020 Extended Combined Cycle Foot Path C1

Condition 6 - WX_N_00R Proposal Issue 1 (1)

Condition 8 - 2023-Acoustic-data

Condition 9 - Berse Road Wrexham - Landscape Management Plan-1a

Condition 10 - BRX_ECOLOGICAL ENHANCEMENT PLAN_2026.05.29 Condition 10 - BRX-WCL-XX-XX-DR-A-0003-C08-SITE - PROPOSED GA

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:

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. ☑

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application. ☑

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:

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

10.06.2026

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10. Applicant Contact Details

Telephone numbers:

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Email address (optional):

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11. Agent Contact Details

Telephone numbers:

Country code:

National number:

Extension number:

Country code:

Mobile 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*)

Agent ☐ Applicant ☑ Other (if different from the agent/applicant's details) ☐

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: