## **Application for issuing a Certificate of Conformity**

# Ammanford / Carmarthen Town Centre

# **Local Development Order (LDO)**

Town and Country Planning Act 1990



Mae'r ddogfen yma hefyd ar gael yn Gymraeg. This document is also available in Welsh.

#### **Publication on Local Planning Authority websites**

Information provided on this form and in supporting documents will 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 us directly.

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

Incorrect completion will delay the processing of your application.

1. Applicant Name and Address					
Title:	First Name:	Last Name:			
Company	y (optional):				
Unit:	House Number:	House suffix:			
House Na	ame:				
Address	1:				
Address 2	2:				
Address	3:				
Town:					
County:					
Country:					
Postcode	5.				
2. Agent	Name and Address				
Title:	First Name:	Last Name:			
Company	y (optional):				
Unit:	House Number:	House suffix:			
House Na	ame:				
Address	1:				
Address 2	2:				
Address :	3:				

Town:			
County:			
Country:			
Postcode:			
3. Site Add	ress Details		
Please prov	ide the full postal a	ddress of the	application site:
Unit: Name:	Property Numb	er:	Property Suffix:
Address 1: Address 2:			
Address 3:			
Town:			
County:			
Postcode:			
4. Ownersh			
Please indic	cate your interest	n the applica	tion site:
Owner	Lessee	Occupier	Other
If you are n application		se provide th	e name and address of the current owner of the
Title:	First Name:		Last Name:
Company (c	optional):		
Unit:	House Number:		House suffix:
House Nam	e:		
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

# . Description of Your Proposal

6. On which floor(s) would the proposed use(s) take place?								
Floor	Existing/Previous Use (if known) Description and Use Class	Proposed Use (if known) Description and Use Class	Number of Residential Units created and number of bedrooms per unit					
Ground								
First								
Second								
Third								
Fourth								
Fifth								
Sixth								

Please describe the proposed change of use (eg: change of use from 'X' to 'Y')

7. Any other relevant information:			
8. For Non-Residential proposals:			
Can you confirm that existing ground-floor windows and shop fronts will not be obscured, either internally or externally, by paint, whitewash, film, curtains or any other opaque material?			
Yes			
9. Conditions and notes:			
Have you read and understood the conditions and notes attached to the Ammanford / Carmarthen Local Development Order?			
Yes			
10. Commencement:			
Do you understand that irrespective of whether a Certificate of Conformity is issued, your proposal cannot commence until a Commencement Notice Approval is issued by the Council?			
Yes			

#### 11. 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.

- completed and dated application form:
- the correct fee of £90
- site / location plan (scale 1:1250) including a north arrow and a red line that shows the application site boundary

#### 12. Declaration

I/we hereby apply for a certificate of conformity 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)

## 13. Applicant Contact Details

Tel	lep	hone l	Ν	lum	bers
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Country Code: National Number: Extension Number:

Country Code: Mobile Number (optional):

Email address (optional):

## 14. Agent Contact Details

#### **Telephone Numbers**

Country Code: National Number: Extension Number:

Country Code: Mobile Number (optional):

Email address (optional):