

Application for a Commencement Notice Approval

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 (optional):

Unit: House Number: House suffix:

House Name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

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:

5. Discharge Of Conditions

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

- | | |
|----|-----|
| 1. | 8. |
| 2. | 9. |
| 3. | 10. |
| 4. | 11. |
| 5. | 12. |
| 6. | 13. |
| 7. | 14. |

Please provide a full description of the appended details that are being submitted for approval: (eg: written confirmation from relevant Department / Body)

6. 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 information necessary to support the discharge of condition(s)

7. Declaration

I/we hereby apply for commencement notice approval 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)

8. Applicant Contact Details

Telephone Numbers

Country Code:

National Number:

Extension Number:

Country Code:

Mobile Number (optional):

Email address (optional):

9. Agent Contact Details

Telephone Numbers

Country Code:

National Number:

Extension Number:

Country Code:

Mobile Number (optional):

Email address (optional):