

## Application for Permission in Principle

### Town and Country Planning Act 1990

### Town and Country Planning (Permission in Principle) (Amendment) Order 2017

Permission in principle may be granted for minor housing-led development only. Article 5B of the Permission in Principle (Amendment) Order 2017 sets out development that is specifically excluded from a grant of permission in principle and this includes habitats and EIA development.

#### Privacy Notice

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

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or 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 a 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.

#### 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.

Find contact details for Local Planning Authorities: <https://www.planningportal.co.uk/lpasearch>

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

#### 1. Applicant Name and Address

|                     |                                                           |             |                                    |
|---------------------|-----------------------------------------------------------|-------------|------------------------------------|
| Title:              | <input type="text" value="Ms"/>                           | First name: | <input type="text" value="Fiona"/> |
| Last name:          | <input type="text" value="Bendall"/>                      |             |                                    |
| Company (optional): | <input type="text" value="Hush Land &amp; Property Ltd"/> |             |                                    |
| Unit:               | <input type="text"/>                                      | Number:     | <input type="text"/>               |
|                     | Suffix: <input type="text"/>                              |             |                                    |
| Building name:      | <input type="text" value="c/o Agent"/>                    |             |                                    |
| Address 1:          | <input type="text"/>                                      |             |                                    |
| Address 2:          | <input type="text"/>                                      |             |                                    |
| Address 3:          | <input type="text"/>                                      |             |                                    |
| Town:               | <input type="text"/>                                      |             |                                    |
| County:             | <input type="text"/>                                      |             |                                    |
| Country:            | <input type="text"/>                                      |             |                                    |
| Postcode:           | <input type="text"/>                                      |             |                                    |

#### 2. Agent Name and Address

|                     |                                              |             |                                    |
|---------------------|----------------------------------------------|-------------|------------------------------------|
| Title:              | <input type="text" value="Mr"/>              | First name: | <input type="text" value="Simon"/> |
| Last name:          | <input type="text" value="Chambers"/>        |             |                                    |
| Company (optional): | <input type="text" value="LPC (Trull) Ltd"/> |             |                                    |
| Unit:               | <input type="text"/>                         | Number:     | <input type="text"/>               |
|                     | Suffix: <input type="text"/>                 |             |                                    |
| Building name:      | <input type="text"/>                         |             |                                    |
| Address 1:          | <input type="text" value="Trull"/>           |             |                                    |
| Address 2:          | <input type="text"/>                         |             |                                    |
| Address 3:          | <input type="text"/>                         |             |                                    |
| Town:               | <input type="text" value="Tetbury"/>         |             |                                    |
| County:             | <input type="text" value="Glos"/>            |             |                                    |
| Country:            | <input type="text"/>                         |             |                                    |
| Postcode:           | <input type="text" value="GL8 8SQ"/>         |             |                                    |

### 3. Description of the proposed development including any non-residential development

Erection of 2No dwelling.

Net number  
of dwellings:

Min: 2

Max: 2

Amount of non-residential  
use(s) (e.g. floorspace or area):

(Can be expressed as a range, a maximum or a fixed amount)

### 4. Site information

Description and amount of existing use(s) of site:

Please refer to supporting correspondence -  
LPC6300-WCN-08042026

Site Area (hectares): 0.0798

If you propose to attach any supporting information relating to  
known or likely constraints on the site please briefly describe what  
information you intend to provide.

### 5. Site Address Details

Please provide the full postal address of the application site.

Unit:

House

number:

House

suffix:

House  
name:

Land at No 34

Address 1:

Broad Town Road

Address 2:

Broad Town

Address 3:

Town:

Royal Wootton Bassett

County:

Wiltshire

Postcode (optional):

SN4 7RB

Description of location or a grid reference - must be completed if  
postcode is not known:

Easting:

Northing:

Description:

### 6. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent?

☐ Yes

☒ No

With respect to the authority, I am:

(a) a member of staff

(b) an elected member

(c) related to a member of staff

(d) related to an elected member

If Yes, please provide details of their name, role and how you are related to them

## 7. Declaration

I/We hereby apply for permission in principle as described in this form. I/We confirm that to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

|                                                        |                |
|--------------------------------------------------------|----------------|
| Signed - Applicant                                     |                |
| Or signed - Agent                                      | Simon Chambers |
| Date (DD/MM/YYYY):<br>(date cannot be pre-application) | 08/04/2026     |

## 8. 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: | <input checked="" type="checkbox"/> | The original and 3 copies of the plan which identifies the land to which the application relates: | <input checked="" type="checkbox"/> |
| The correct fee:                                                     | <input checked="" type="checkbox"/> | Any supporting information:                                                                       | <input checked="" type="checkbox"/> |

## 9. Applicant Contact Details

Telephone numbers

|               |                           |            |
|---------------|---------------------------|------------|
| Country code: | National number:          | Extension: |
|               |                           |            |
| Country code: | Mobile number (optional): |            |
|               |                           |            |
| Country code: | Fax number (optional):    |            |
|               |                           |            |

Email address:

## 10. Agent Contact Details

Telephone numbers

|               |                           |            |
|---------------|---------------------------|------------|
| Country code: | National number:          | Extension: |
|               | 01285 841 433             |            |
| Country code: | Mobile number (optional): |            |
|               |                           |            |
| Country code: | Fax number (optional):    |            |
|               |                           |            |

Email address: