

Application for Permission in Principle

Town and Country Planning Act 1990 (as amended)

Town and Country Planning (Permission in Principle) Order 2017 (as amended)

Current legislative restrictions mean that proposals must: include at least 1, and no more than 9 dwellings; create less than 1,000 square metres of floorspace; and be on a site of less than 1 hectare. There are further restrictions on development defined as 'householder', 'habitat' (relating to protected sites), and 'Schedule 1/Schedule 2' (relating to environmental impact assessment).

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 the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

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 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:



**WOKINGHAM
BOROUGH COUNCIL**

Wokingham Borough Council
Planning Services
PO Box 157, Civic Offices, Shute End
Wokingham, Berkshire
RG40 1WR
email: development.control@wokingham.gov.uk
Phone: 0118 974 6000

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.

1. Applicant Name and Address

Title:	Mr	First name:	
Last name:	ATKINSON		
Company (optional):	CHARLES GATE HOUSE LIMITED		
Unit:		Number:	1010
Suffix:			
Building name:			
Address 1:	ESKDALE ROAD		
Address 2:	WINNERSH FRIARIE		
Address 3:			
Town:	WOKINGHAM		
County:			
Country:			
Postcode:	RG41-4TS		

2. Agent Name and Address

Title:		First name:	
Last name:			
Company (optional):			
Unit:		Number:	
Suffix:			
Building name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

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

PLANNING IN PRINCIPLE FOR PHASED APPLICATION for UP
To 4 SERVICED PLOTS / DWELLINGS

Net number
of dwellings:

Min:

3

Max:

4

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

NA

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

4. Site information

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

DOMESTIC GARDEN AND
EQUESTRIAN

Site Area (hectares):

0.4

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:

Address 1:

LAND TO REAR HUCKLEBURY

Address 2:

WAINGESS ROAD

Address 3:

CHACVIL

Town:

WOKINGHAM

County:

Postcode (optional):

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

Easting:

477541

Northing:

174880

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 correct and the opinions given are the genuine opinions of the person(s) giving them.

Signed - Applicant

Or signed - Agent

Date (DD/MM/YYYY):

(date cannot be pre-application)

17/08/2026

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:



The correct fee:



The original and 3 copies of the plan which identifies the land to which the application relates:



Any supporting information:



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:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address: