

**SOUTH DUBLIN COUNTY COUNCIL**



**APPLICATION FOR EXTENSION OF DURATION OF  
PERMISSION  
Section 42 Planning and Development Act 2000  
(as amended)**

Development, Economic and Transport Planning Department, County Hall,  
Tallaght, Dublin 24  
Telephone: 01 4149000 Fax: 01 4149104 Email: [planning.dept@sdblincoco.ie](mailto:planning.dept@sdblincoco.ie)

PLEASE NOTE THAT INFORMATION SUBMITTED WITH YOUR APPLICATION WILL BE  
AVAILABLE TO VIEW ON THE COUNCIL'S WEBSITE WITH THE EXCEPTION OF CONTACT  
DETAILS OF APPLICANTS [www.sdblincoco.ie](http://www.sdblincoco.ie)

**STANDARD APPLICATION FORM & ACCOMPANYING DOCUMENTATION:**  
Please read directions & documentation requirements at back of form before  
completion.

**All questions relevant to the proposal being applied for must be answered.**

Non-relevant questions: Please mark n/a

*Please ensure all necessary documentation is attached to your application form.*

**DATA PROTECTION**

*The publication of applications by planning authorities may lead to applicants being targeted by persons engaged in direct marketing. In response to a request from the Data Protection Commissioner, you are given an opportunity to indicate a preference with regard to the receipt of direct marketing arising from the lodging of this application.*

*If you are satisfied to receive direct marketing please tick this box.*

*It is the responsibility of those wishing to use the personal data on applications for direct marketing purposes to be satisfied that they may do so legitimately under the requirements of the Data Protection Acts 1988 & 2003 taking account of the preference outlined above.*

Land Use Planning & Transportation

24 MAY 2022

South Dublin County Council

**1. NAME OF APPLICANT FOR EXTENSION OF DURATION OF PERMISSION:**

Dublin Simon Community

*Address To be supplied at end of this application form - Question 14*

**2. PERSON ACTING ON BEHALF OF THE APPLICANT (IF ANY):**

Walsh Associates Architects & Project Managers

*Address To be supplied at end of this application form - Question 15*

**3. ADDRESS OF STRUCTURE OR LAND TO WHICH PERMISSION RELATES:**

Lands at Old Nangor Road, Clondalkin, Dublin 22.

**4. DEVELOPMENT TO WHICH PERMISSION RELATES:**

A social housing development comprising of 10 one bed units in a three storey apartment building, associated car parking and bicycle parking, bin store, new vehicular access onto Old Nangor Road, new pedestrian access to replace existing vehicular entrance, landscaping, boundary treatments and all associated site and engineering works necessary to facilitate the development.

**5. PARTICULARS OF INTEREST IN LAND OR STRUCTURE HELD BY THE APPLICANT:**

Freehold Owner

**6. PLANNING REFERENCE NO. AND DATE OF PERMISSION SOUGHT TO BE EXTENDED:**

SD16A/0450

Date of Decision 13 June 2017

Date of Final Grant 21 July 2017

**7. IN THE CASE OF AN *OUTLINE PERMISSION* THE PLANNING REFERENCE NO. OF ANY SUBSEQUENT APPROVAL(S):**

Not Applicable

**8. DATE PERMISSION WILL CEASE TO HAVE EFFECT:**

21 July 2022

**9. DATE DEVELOPMENT COMMENCED:**

*Proposed works not commenced.*

**10. PARTICULARS OF SUBSTANTIAL WORKS CARRIED OUT BEFORE THE PERMISSION WILL EXPIRE:**

*Proposed works not commenced.*

**11. PERIOD BY WHICH THE PERMISSION IS SOUGHT TO BE EXTENDED:**

June 2024

**12. DATE ON WHICH THE DEVELOPMENT IS EXPECTED TO BE COMPLETED:**

June 2024

**13. DETAILS OF THE CIRCUMSTANCES BEYOND THE CONTROL OF THE PERSON CARRYING OUT THE DEVELOPMENT AS A RESULT OF WHICH THE DEVELOPMENT WAS NOT COMPLETED. (SEE NOTES ATTACHED):**

*'that there were considerations of a commercial, economic or technical nature beyond the control of the applicant which substantially militated against either the commencement of development or the carrying out of substantial works pursuant to the planning permission,'*

Refer to the Appended Cover Letter outlining above.

Signed (Applicant <del>or</del> Agent as appropriate)	Owen Moran Walsh Associates
Date:	23/05/2022

Fee not Applicable. Charity Number 5963, Dublin Simon Community  
Company Reg no. 32955.

**FOR OFFICE USE ONLY**

Date Received \_\_\_\_\_

Register Reference \_\_\_\_\_

Fee Received € \_\_\_\_\_ (fee payable is €62.00)

Receipt No \_\_\_\_\_ Date: \_\_\_\_\_

O.S.I. Map Reference \_\_\_\_\_