

For office use only

Application No.

Date received 0 1 1 0 5 6 3 P

Fee paid £

2. Agent Name and Address

First name:

Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2RA Tel: 01200 425111 www.ribblevalley.gov.uk

Householder Application for Planning Permission for works or extension to a dwelling.

Town and Country Planning Act 1990

## Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink

First name:

1. Applicant Name and Address

Title:

Last name:

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Title:

Last name:

Company (optional):	(optional):
Unit: House number: 23 House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: WALMS VEY BADW	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: BILLINGTON	Town:
County: LANCS	County:
Country:	Country:
Postcode: BB7 9TT	Postcode:
3. Description of Proposed Works	
3. Description of Proposed Works Please describe the proposed works:	
Please describe the proposed works:	V TO REAR OF
•	V TO REAR OF
Please describe the proposed works:  SINGE STORY EXTENSION	V 70 REAR OF
Please describe the proposed works:  SINGE STORY EXTENSION	V 70 REAR OF
Please describe the proposed works:  SINGE STORY EXTENSION	V TO REAR OF
Please describe the proposed works:  SINGE STORY EXTENSION	V TO REAR OF
Please describe the proposed works:  SINGE STORY EXTENSION	V TO REAR OF
Please describe the proposed works:  SINGUE STORY EXTENSION	V 7~ REAR OF  \$Date: 2009/03/23 15:29:39 \$ \$Revision: 3 7 \$

3. Descri	ption of Proposed Works (continued)	
Has the wor	k already started? Yes V No	
If Yes, please	e state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the wor	k already been completed? Yes No	
If Yes, please	e state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Ad	Idress Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provi	de the full postal address of the application site.	Is a new or altered vehicle access proposed to or from the public highway? Yes V No
Unit:	House number: 23 House suffix:	Is a new or altered pedestrian access
House name:		proposed to or from the public highway? Yes V No  Do the proposals require any diversions,
Address 1:	warmsvey blow	extinguishments and/or creation of public rights of way?
Address 2:		If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:		drawing(s):
Town:	BILLIMATON	
County:	LAMCS	
Postcode (optional):	1387 9TT	
6. Pre-ap	plication Advice	7. Trees and Hedges
Has assistan	ce or prior advice been sought from the local	Are there any trees or hedges on your own
authority ab	out this application? Yes No	property or on adjoining properties which are within falling distance of your boundary? Yes No
	e complete the following information about the advice ven. (This will help the authority to deal with this	If Yes, please mark their position on a scaled
application	more efficiently).	plan and state the reference number of any plans or drawings:
	the full contact details are not then complete as much possible:	A characteristic for the characteristic for t
Officer nam	<del></del>	
Reference:		
		Will any trees or hedges need to be removed or pruned in
1	Date (DD MM YYYY):	order to carry out your proposal? Yes No
(must be pre-application submission)		If Yes, please show on your plans which trees by giving them
Details of th	ne pre-application advice received:	numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale.
August State		
	·	
l		
		9. Authority Employee / Member
8. Parkin Will the pro	<b>g</b> posed works affect /	With respect to the Authority Lam
=	parking arrangements? Yes V No	(a) a member of staff (b) an elected member  Do any of these statements apply to you?
If Yes, pleas	e describe:	(c) related to a member of staff (d) related to an elected member
		If yes please provide details of the name, relationship and role
1		

Materials applicable, please sta	te what materials are to be used externally.	3 2 0 1 1 (Include type, colour and name for each material:	)563 F	<del>)</del>
	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	BRICHWORK	Bei comorax (TO MATE	н) 🗀	
Roof	concrépe Tivés	concrept Tuts (To	иси) 🗆	
Windows	ulve	UNC		
Doors	Me	VNC		
Boundary treatments (e g. fences, walls)			Q	
Vehicle access and hard-standing			ব	
Lighting				
Others (please specify)			Z	
	 itional information on submitted plan(s)/di rences for the plan(s)/drawing(s)/design an		Yes	No No

11. Ownership Certificates				ish this amplicatio	n form
One Certificate A, B, C, or D, must be co Town and Country Plannir I certify/The applicant certifies that on the country (owner is a person with a freehold inter-	CERTIFICAT	E OF OWNERSHIP - CER evelopment Procedure	TIFICATE A Order 1995 Certificate Cation nobody except my	under Article 7 //self/ the applicant wa	as the
which the application relates. Signed - Applicant:		Or signed - Agent:		Date (DD/MA	
* \$				13/7/	11
Town and Country Plannin I certify/ The applicant certifies that I have/ 21 days before the date of this application, which is the same of the land or building	g (General De the applicant was the owner	has given the requisite no r (owner is a person with a	Order 1995 Certificate un otice to everyone else (as	listed below) who, or	n the day
Name of Owner		Address		Date Notice S	Served
			Note that the same of the same		
			_ "		
Signed - Applicant		Or signed - Agent:		Date (DD/MM	1/YYYY):
Neither Certificate A or B can be issued and the least and the least and the least are least a	n to find out t	he names and addresses	of the other owners (own Iding, or of a part of it , bu	er is a person with a fre t   have/ the applicant	ehold t has
Name of Owner		Address		Date Notice S	erved
10-10					
				-	
			·		
Notice of the application has been published circulating in the area where the land is situ	d in the follow ated):	ring newspaper	On the following date ( than 21 days before the	which must not be ear date of the application	rlier on):
Tigned Ambliants		Oreigned Agent		Date (DD/MM	10000
Signed - Applicant:		Or signed - Agent:			<i>y</i>

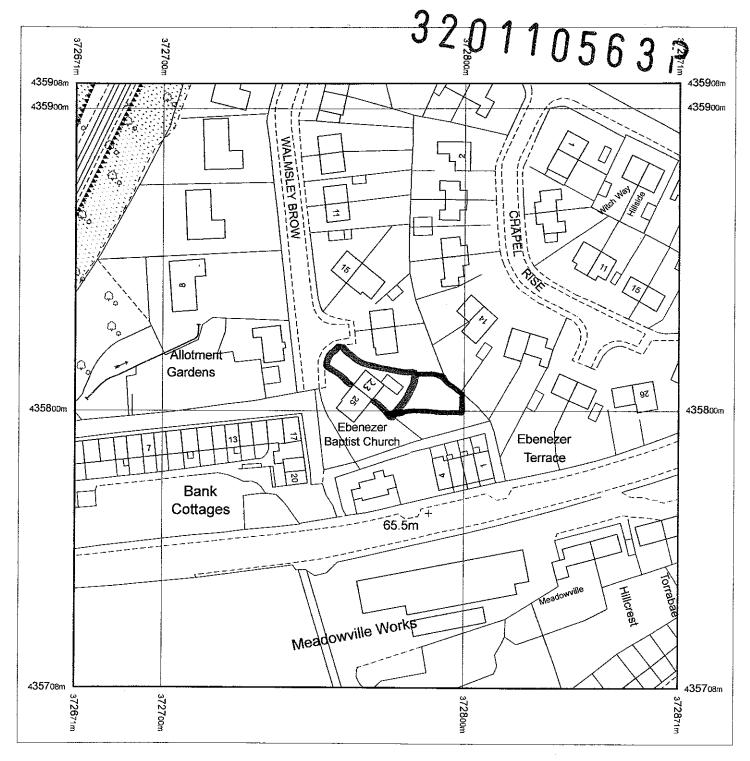
		220110563
Ownership Certificates (contin		3 2 0 1 1 0 5 6 3 P
Town and Country Plannir	CERTIFICATE OF OWNERSHIP - CERTIFICATE D ng (General Development Procedure) Order 199	5 Certificate under Artikle 7
fy/ The applicant certifies that: Certificate A cannot be issued for the	his application	the day setore the
All reasonable steps have been take	en to find out the flattles and addresses of everyon	sehold interest with at least 7 years left to run)
of any part of the land to which thi	wner (owner is a person with a freehold interest of feat is application relates, but I have/ the applicant has	peen unable to do so.
teps taken were:		
	and in the following newspaper On the	following date (which must not be earlier
e of the application has been publish lating in the area where the land is si	lett in the loughting here are	1 days before the date of the application):
ed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
3d - Applicant		
Agricultural Holdings		
	AGRICULTURAL HOLDINGS CERTIFICATE ing (General Development Procedure)Order 199	5 Certificate under Article 7
Town and Country Planni Agricult	ural Land Declaration - You Must Complete Either	A or B
	tion relates is, or is part of, an agricultural holding.	
	Or signed - Agent:	Date (DD/MM/YYYY)
ned - Applicant:		1817/201
have/ The applicant has given the rec	quisite notice to every person other than myself/the	ne applicant who, on the day 21 days ne land to which this application relates,
ore the date of this application, was a	quisite notice to every person other than myself/tr tenant of an agricultural holding on all or part of th	
sted below: Name of Tenant	Address	Date Notice Served
Name of Tenant		
1		
+		
	Or signed - Agent:	Date (DD/MM/YYY
gned - Applicant:	Or signed - Agent:	Date (DD/MM/YYY
gned - Applicant:	Or signed - Agent:	Date (DD/MM/YYY
		Date (DD/MM/YYY
Dispuing Application Requi	irements - Checklist	Tailure to submit all
Dispuing Application Requi	irements - Checklist	ort of your proposal. Failure to submit all nsidered valid until all information required b
B. Planning Application Requires read the following checklist to me	irements - Checklist  Take sure you have sent all the information in support application being deemed invalid. It will not be considered.	ort of your proposal. Failure to submit all nsidered valid until all information required b
ease read the following checklist to me formation required will result in your are Local Planning Authority has been sectional and 3 copies of a	irements - Checklist  lake sure you have sent all the information in support application being deemed invalid. It will not be consubmitted.  The original and 3 copies of a	Tailuro to submit all
ease read the following checklist to me ormation required will result in your are Local Planning Authority has been see original and 3 copies of a mpleted and dated application form:	irements - Checklist  lake sure you have sent all the information in support application being deemed invalid. It will not be consubmitted.  The original and 3 copies of a design and access statement where proposed works fall within one of	ort of your proposal. Failure to submit all insidered valid until all information required by The correct fee:
ease read the following checklist to me formation required will result in your are Local Planning Authority has been see original and 3 copies of a simpleted and dated application form:	irements - Checklist  The original and 3 copies of a design and access statement where proposed works fall within one of the following designated areas:	ort of your proposal. Failure to submit all insidered valid until all information required by The correct fee: \$150.99  The original and 3 copies of the Outporthin
ease read the following checklist to me formation required will result in your are Local Planning Authority has been see original and 3 copies of a see original and 3 copies of a mapleted and dated application form: the original and 3 copies of a plan whice entifies the land to which the application formal three drawn to an identified scale	irements - Checklist  lake sure you have sent all the information in support application being deemed invalid. It will not be consubmitted.  The original and 3 copies of a design and access statement where proposed works fall within one of the following designated areas:  National Park Site of special scientific interest	ort of your proposal. Failure to submit all insidered valid until all information required by The correct fee:
ease read the following checklist to me or a correction and a copies of a mpleted and dated application form: the original and 3 copies of a mpleted and dated application form: the original and 3 copies of a plan whice original and 3 copies origina	irements - Checklist  The original and 3 copies of a design and access statement where proposed works fall within one of the following designated areas:  National Park Site of special scientific interest Conservation area	The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable):
ease read the following checklist to me formation required will result in your are Local Planning Authority has been see original and 3 copies of a see original and 3 copies of a mapleted and dated application form: the original and 3 copies of a plan whice entifies the land to which the application formal three drawn to an identified scale	irements - Checklist  lake sure you have sent all the information in support application being deemed invalid. It will not be consubmitted.  The original and 3 copies of a design and access statement where proposed works fall within one of the following designated areas:  National Park Site of special scientific interest Conservation area Area of outstanding natural beauty	ort of your proposal. Failure to submit all insidered valid until all information required by  The correct fee: 150.99  The original and 3 copies of the

information.	t as described in th Or signed - Agent:	Date (DD/MM/YYYY):  13/7/11 (date cannot be pre-application)
15. Applicant Contact Details		16. Agent Contact Details
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Extension number:	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax pumber (optional):  Email address (optional):
17. Site Visit  Can the site be seen from a public road, public footy  If the planning authority needs to make an appoint out a site visit, whom should they contact? (Please so the state of the planning of the planning authority needs to make an appoint out a site visit, whom should they contact? (Please so the planning of the plann	ment to carry	other public land? Yes No Applicant Other (if different from the agent/applicant's details)  Telephone number:





## OS Sitemap®



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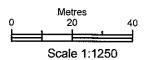
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