

2 2 JUN 2012

For office use only

Application 001 2 0 5 6 7 P

Date received

Fee paid £

Receipt No:

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

Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

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

1. Applicant Name and Address	2. Agent Name and Address
Title: MV First name: GORDON	Title: First name:
Last name: GREEN WOOD	Last name:
Company (optional):	Company (optional):
Unit: House House suffix:	Unit: House House suffix:
House name: DOVE COTTAGE	House name:
Address 7: WHAUEY ROAD	Address 1:
Address 2: SABPEN	Address 2:
Address 3:	Address 3:
Town: CLITHEROE	Town:
County: CANES	County:
Country: UK	Country:
Postcode: BB7 9DT	Postcode:
3. Description of Proposed Works	
Please describe the proposed works:	
PROPOSED GUEST ACCOM	LODATION FOR MITTING
FRIENDS AND RECATIVES	- 11
SINGLE BEDROOM AND	•

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3. Description of Proposed Works (continued)	
Has the work already started? Yes No	
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed? Yes No	
If Yes, please state when the work was completed (DD/MM/YYYY):	
	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	is a new or altered vehicle access
Unit: House House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name: POVE COTTAGE	proposed to or from the public highway? Yes No
	Do the proposals require any diversions,
1.00/10	extinguishments and/or creation of public rights of way? Yes No
Address 2: SABDEN	If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
TOWN: CLITHERDE	
County: LANCS	
Postcode (optional): RB7 9DT	
6. Pre-application Advice	7. Trees and Hedges
Has assistance or prior advice been sought from the local authority about this application? Yes No	Are there any trees or hedges on your own
\(\nabla_1,\cdot\) \(\nabla_1,\	property or on adjoining properties which are within falling distance of your proposed
If Yes, please complete the following information about the advice	development? Yes No
you were given. (This will help the authority to deal with this application more efficiently)	if Yes, please mark their position on a scaled
Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:
known, and then complete as much possible:	THE CONTRACT OF THE CONTRACT O
Officer name:	Annual de la constant
COUN SHARPE.	The part of the pa
Reference:	1221
	Will any trees or hedges need to be removed or pruned in
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 the pre-application advice received:	numbers e.g. 71, T2 etc, state the reference number of the plan(s)/
	drawing(s) and indicate the scale.
(*	The same of the sa
1	
Service Control of the Control of th	The state of the s
B. Parking	9. Authority Employee / Member
Will the proposed works affect	With respect to the Authority, I am:
existing car parking arrangements? Yes No	(a) a member of staff (b) an elected member statements apply to you?
f Yes, please describe:	fol polosodes
Transport	(d) related to an elected member Yes No
Parameters of the Control of the Con	If Yes, please provide details of the name, relationship and role
—————————————————————————————————————	
Belle and)

	Existing (where applicable)	Proposed	Not applicable	Don Kno
Walls	FIMBER_	TIMBER		
Roof		DARK BWE TILES		
Windows		TIMBER		
Doors		TIMBER		
Boundary treatments (e.g. fences, walls)		BROWN CUPRINGC		
Vehicle access and hard-standing		EXISTING PRIVATE AREA		
Lighting				
Others please specify)				
Yes, please state refere	onal information on submitted plan(s)/drawing nces for the plan(s)/drawing(s)/design and access of the plan(s) of the submitted plan(s)/drawing(s)/design and access of the plan(s)/drawing(s)/design and access of the submitted plan(s)/drawing	ess statement:		No

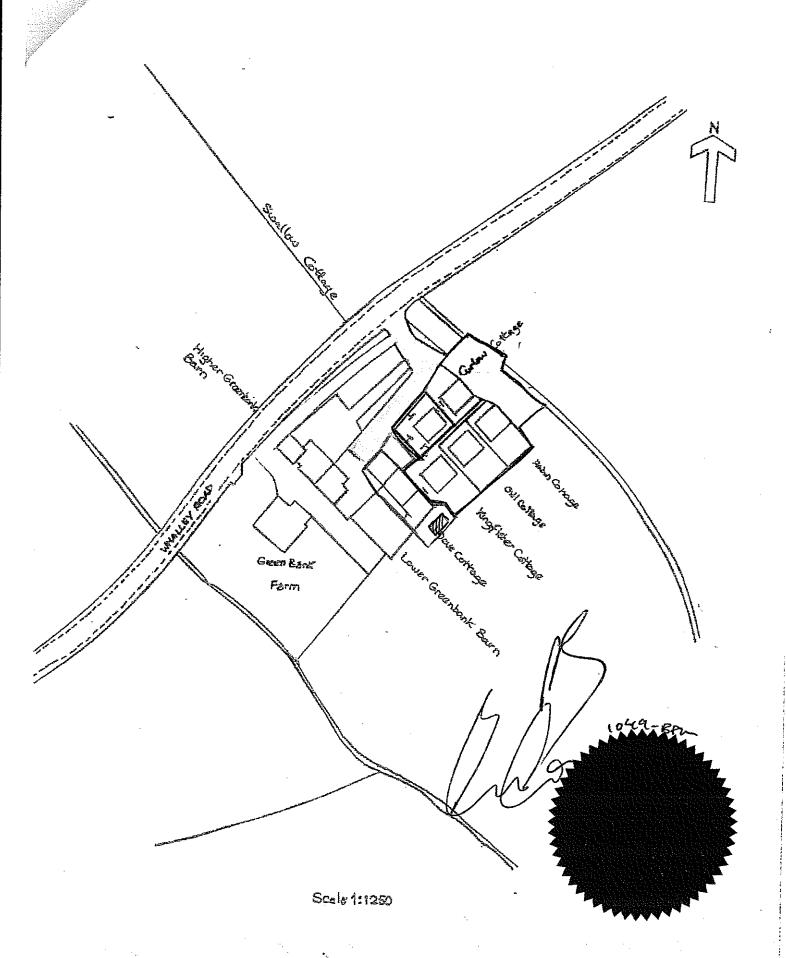
11. Ownership Certificates				
One Certificate A, B, C, or D, m	ust be complete	ed, together with the Agric	ultural Holdings Certifica	te with this annifestion form
1	T-525.11	ale to the contraction of the co	EUTICICATE A	
Town and Country Plannin I certify/The applicant certifies that owner lower is a necessary with a lease	i g (Developmen t on the day 21 d	It Management Procedure avs before the date of this a	(England) Order 2010 Ce	rtificate under Article 12
owner (owner is a person with a free which the application relates	hold interest or le	usehold interest with at least	7 years left to run) of any par	t of the land or building to
Signed - Applicant:		Or signed - Agent:	** ·	•
		Ol signed - Agent		Date (DD/MM/YYY)
				22/me 19
	CERTR	KATE OF OWNERSHIP - C	EGTECETED	
Town and Country Planning I certify/ The applicant certifies tha	r Dovoloomani	Allowa was a second flow and allowed to	JP 18 DATE HOLLEN	tificate under Article 12
21 days before the date of this and	ice nove use upp	cumer launarie a marea adir		
array or any parcon are mind of	building to whic	h this application relates.	n a necuolo mieresi di leasei	ioia interest with at least 7 yea
 Name of Owner 		Addre	55	Date Notice Served
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		(-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-1,-		
igned - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY
		1		
Neither Certificate A or B car All reasonable steps have be interest or leasehold interest v been unable to do so	en taken in find	out the names and addresses	es of the other owners (own ullding, or of a part of it, bu	er is a person with a freehold it I have/ the applicant has
he steps taken were:				
				
Name of Owner		Address		Date Notice Served
	<	7700033		Date Motice Selven
	-			
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tice of the application has been pu	blished in the fo	llowing newspaper	On the following date (w	hich must not be earlier
rculating in the area where the land	। १५ इत्ताअल्यी:		than 21 days before the	date of the application):
ned - Applicant:		Oreignad Assault	J 1	
·····		VI SIGNEO - AMENT		Chates (CITY HERE NAMED).
		Or signed - Agent:		Date (DD/MM/YYYY):
		Or signed - Agent:		Date (DD/MM/YYYY):

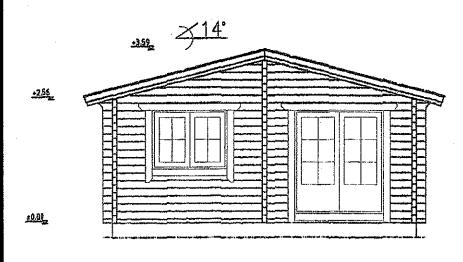
		320120567 P
11. Ownership Certificates (c	ontinued) CERTIFICATE OF OWNERSHIP - CEI	
Certificate A cannot be issued All reasonable steps have bed date of this application, was to	(Development Management Procedure) (I d for this application ED taken to find out the names and addresse	England) Order 2010 Certificate under Article 12 s of everyone else who, on the day 21 days before the
Notice of the application has been pu (circulating in the area where the land	iblished in the following newspaper I is situated):	On the following date (which must not be earlier than 21 days before the date of the application):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY
2. Agricultural Land Declarat	ios	
Town and Country Planning (D	AGRICIII TURBI I BRIT DECI BOR	reland) Order 2010 Covillents and a state 12
	lication relates is, or is part of, an agricultural	holding
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYY)
		22 frue 1
(B) I have/ The applicant has given the before the date of this application, was as listed below:	requisite notice to every person other than s s a tenant of an agricultural holding on all or	myself/ the applicant who, on the day 21 days part of the land to which this application relates,
Name of Tenant	Address	Date Notice Served
	}	
igned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
ilgned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY
signed - Applicant:		Date (DD/MM/YYYY
B. Planning Application Requints to the following checklist to the following checklist to the following checklist to the following checklist to your a	irements - Checklist ake sure you have sent all the information in spolication being deemed invalid. It will not	SUPPORT OF YOUR PROPERTY OF THE PARTY OF THE
B. Planning Application Requints as a read the following checklist to material to require the following checklist to material the following the following Authority has been such as a copies of a	irements - Checklist ake sure you have sent all the information in application being deemed invalid. It will not ubmitted The original and 3 copies of a	support of your proposal. Failure to submit all be considered valid until all information required by
B. Planning Application Requints as e read the following checklist to make the following checklist to make the following and the following Authority has been such that and 3 copies of a make the following Authority has been such that and 3 copies of a plan which the following forms and 3 copies of a plan which the following forms and 3 copies of a plan which the following forms and 3 copies of a plan which the following forms are followed by the following following forms are followed by the following	irements - Checklist ake sure you have sent all the information in application being deemed invalid. It will not ubmitted The original and 3 copies of a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a	support of your proposal. Failure to submit all be considered valid until all information required by The correct fee:
3. Planning Application Requi	irements - Checklist ake sure you have sent all the information in application being deemed invalid. It will not ubmitted The original and 3 copies of a design and access statement if proposed works fall within a conservation area or	support of your proposal. Failure to submit all be considered valid until all information required by The correct fee:

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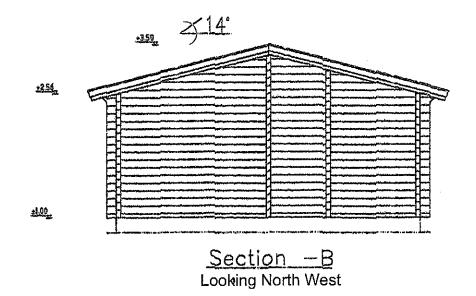
14. Declaration				·	
I/we hereby apply for planning permission/consent a	s described in th	is form and the acco	ompanying plans	drawings and add	litional
Ct. 1 a n	signed - Agent:				
	agrica rigeric			(DD/MM/YYYY):	
					late cannot b re-application
15. Applicant Contact Details		16. Agent Con	tact Details		
Telephone numbers		Telephone numbe	ers		
Country code: National number:	Extension number:		Vational number:		Extension number;
Country code: Mobile number (optional):]	Country code: A	Mobile number (c	optional):]
Country code: Fax number (optional):		Country code: F	ax number (optic	onal):	
Email address (optional):		Email address (opt	tional):		
(September 1965)					
17. Site Visit					
Can the site be seen from a public road, public footpat	h, brid leway or c	other public land?	Yes	No	
if the planning authority needs to make an appointme out a site visit, whom should they contact? (Please selei	of to carn,	Agent	Applicant	Other (if differ	
f Other has been selected, please provide:	,			L agent/applica	nt's details)
Contact name:		Telephone number:	•		
				W	
Email address:					
1					

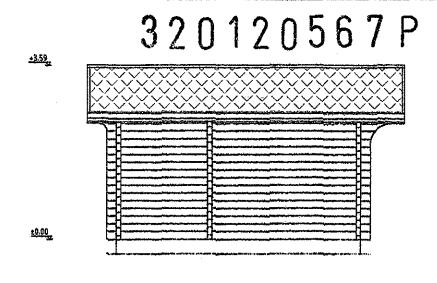
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Section - A
Looking South East





Section -- C Looking North East

