



For office use only Application Not 3 0 0.8 5 P

Fee paid €

Receipt No:

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

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.

Applicant Name and Address	2. Agent Name and Address
Title: MP. First name: J.	Title: MISS First name: 4.
Last name: BROWN	Last name: GILL
Company (optional):	Company (optional):
Unit: House House suffix:	Unit: House House suffix:
House c/o L. GTLL	HOUSE RATTEN CLOUGH FARM
Address 1:	Address 1: WESLEY STREET
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town: SABDEN.
County:	County: CANCS.
Country:	Country:
Postcode:	Postcode: BB7 9EN.
3. Description of Proposed Works	

Please describe the proposed works:

PROPOSED DEMOLITION OF EXISTING KITCHEN AND STORE AND REPLACEMENT WITH SINGLE STOREY KITCHEN AND UTILITY.

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3. Descri	ption of Proposed Works (a	ontinued)		
Has the wor	k already started?	Yes	<u>.</u> √‰	
If Yes, pleas	e state when the work was started	(DD/MM/YYY	Y}:	(date must be pre-application submission)
Has the wor	k already been completed?	Yes	No	
If Yes, pleas	e state when the work was comple	eted (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 ap	<u> </u>	·İ	is a new or altered vehicle access
Unit;	House number:	House suffix:		proposed to or from the public highway? Yes No is a new or altered pedestrian access
House name:	48 CHATBURN	ZOAC	2	proposed to or from the public highway? Yes No Do the proposals require any diversions,
Address 1:		·		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:	CLITHEROE			
County:	LANCS.			
Postcode (optional):	BB7 2AP.]	
6. Pre-ap	pilcation Advice		$\overline{}$	7. Trees and Hedges
	ce or prior advice been sought from out this application?		7Ñ0	Are there any trees or hedges on your own property or on adjoining properties which
If Yes, please	ء complete the following informati		~ I	are within falling distance of your proposed development?
you were giv	en. (This will help the authority to			if Yes, please mark their position on a scaled
Please tick if	more efficiently) the full contact details are not	_		plan and state the reference number of any plans or drawings:
	then complete as much possible:		1	1
Officer nam	E:]	
Reference:	•	•		
- Individue:]	Will any trees or hedges need
	Date (DD MM YYYY):			to be removed or pruned in order to carry out your proposal? Yes No
•	-application submission)	=•		If Yes, please show on your plans which trees by giving them
Details of th	e pre-application advice received:			numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.
			:	
			il	
!				1
<u></u>			<u></u>	()
8. Parking	3			9. Authority Employee / Member
	osed works affect	—) V —	اً مندح	With respect to the Authority, I am: (a) a member of staff Do any of these
If Yes, please	parking arrangements? [Yes u	ZNo	(b) an elected member statements apply to you?
ii res, please		•••]	(c) related to a member of staff Yes Yes Yes
				if Yes, please provide details of the name, relationship and role
				MRS JE BROWN MOTHER OF APPLICANT

	Existing (where applicable)	Proposed		Not applicable	Don' Knov
Walls	RENDER	pender.			
Roof	SLATE	SCATE			
Windows	UPVC-	upvc			
Doors	upuc.	UPVC			
Boundary treatments (e.g. fences, walls)	N/A	N/A			
Vehicle access and hard-standing	NIA	N/A			
Lighting	NA	N/A.			
Others please specify)					
	ional information on submitted plan(s) nces for the plan(s)/drawing(s)/design	/drawing(s)/design and access statement? and access statement:	Yes	1	

11. Ownership Certificates	,	· · · · · · · · · · · · · · · · · · ·	".
One Certificate A, B, C, or D, must Town and Country Planning (CERTIFICATE OF Development Manage	FOWNERSHIP - CERTIFICATE A ment Procedure) (England) Order	Certificate with this application form 2010 Certificate under Article 12
I certify/The applicant certifies that or owner (owner is a person with a freehol	the day 21 days before Id interest or leasehold int	the date of this application nobody terest with at least 7 years left to run) o	except myself/ the applicant was the of any part of the land or building to
which the application relates Signed - Applicant:		-	
Signed - Applicant:	Ur:	signed - Agent:	Date (DD/MM/YYYY)
		hari	16/01/13
I certify/ The applicant certifies that I	Development Manager have/the applicant has q tion, was the owner (ow	mer is a nerson with a freehold interes	2010 Certificate under Article 12 ne else (as listed below) who, on the da at or leasehold interest with at least 7 year
Name of Owner		Address	Date Notice Served
			·
•			
	<u></u>		
Signed - Applicant:	Or si	igned - Agent:	Date (DD/MM/YYYY)
	1		
Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest wit been unable to do so. The steps taken were:	т takeл to find out the na	ames and addresses of the other ow	ners (owner is a person with a freehold at of it, but I have/ the applicant has
· ,		,	
Name of Owner	T.	Address	Date Notice Served
	: 		
. <u>.</u>			
		•	

otice of the application has been publiculating in the area where the land I	lished in the following nostuated):		ing date (which must not be earlier perore the date of the application):
igned - Applicant:	Orafo		Date (DD/MM/YYYY):
		anco-Agent	Date (DD/MAW 1971):

			. J L	
11. Ownership Certificates (con	-			
Town and Country Planning (Do		E OF OWNERSHIP CERTI ragement Procedure) (ፎብር		under Article 12
I certify/ The applicant certifies that: Certificate A cannot be issued for	•	_		
 All reasonable steps have been 	taken to find out t	the names and addresses o	of everyone else who, on the da	y 21 days before the
date of this application, was the of any part of the land to which	: owner (owner is a this application is	s person with a treenoid inte- elates, but I have/ the appli	rest or leasehola interest with at cant has been unable to do so.	least / years iert to run)
The steps taken were:		•		*****
Notice of the application has been publication	ished in the follow	vina newshanet	On the following date (which	must not be earlier
(circulating in the area where the land is	situated):	Mild Designation	than 21 days before the date	of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
		i		
		<u></u>		
12. Agricultural Land Declaration		TURAL LAND DECLARATI	(AN	
Town and Country Planning (Det	velopment Mana	gement Procedure) (Engl	and) Order 2010 Certificate u	nder Article 12
Āgricu	ltural Land Declar	ation - You Must Complete	Either A or B	
(A) None of the land to which the applic	ation relates is, or		olding	
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
		hari		16/01/13
(B) I have/ The applicant has given the re			vself/ the applicant who, on the	I
before the date of this application, was a silsted below:	a tenant of an agri	cultural holding on all or p	art of the land to which this ap	plication relates,
as listed below; Name of Tenant	T	Address		Date Notice Served
				241.134
	}			
"	412			
	<u> </u>			
				į
	<u> </u>			
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
	:			
		<u> </u>		
3. Planning Application Requir	ements - Chec	:klist		
Please read the following checklist to mai information required will result in your ap	ke sure you have s	sent all the information in s	support of your proposal. Fallui	re to submit all
he Local Planning Authority has been su	bmitted			macon required by
The original and 3 copies of a completed and dated application form:		inal and 3 copies of a and access statement if	The correct fee:	⊡ ∕
The original and 3 copies of a plan which	proposed	d works fall within a ition area or	The original and 3 cop	les of the
identifies the land to which the application	on World He	eritage Site, or relate to a	completed, dated Owr	nership [77]
and showing the direction of North:	Listed Bu	ıîlding:	Certificate (A, B, C or D	- as applicable): —
he original and 3 coples of other plans			The original and 3 copi	ies of the
and drawings or information necessary to describe the subject of the application:	, r		completed, dated Artic (Agricultural Holdings)	

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Signed - Applicant;	Or signed - Agent:	Date (DD/MM/YYYY):
	La	16/01/13 (date cannot be pre-application
15. Applicant Contact Details		16. Agent Contact Details
Telephone numbers		Telephone numbers
Country code: National number.	Extension number:	Country code: National number: Extension number:
Country code: Mobile number (optional):		Country code: Mobile number (optional): 07745 SS4 180
Country code: Fax number (optional):	, 	Country code: Fax number (optional):
Email address (optional):	i	Email address (optional):
		1-gill 2232 @hormail.co.uk.
7. Site Visit		
an the site be seen from a public road, public	footpath, bridleway or	other public land?
the planning authority needs to make an app ut a site visit, whom should they contact? (Ple	ointment to carry	Agent Applicant Other (if different from the agent/applicant's details)
Other has been selected, please provide:		agent/appacant's Details)
Contact name:	·	Telephone number:
•		



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