

320140578P

For office use only Application No.

Date received

Fee paid £

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

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:	MR First name: Cocin	Title: First name:		
Last name:	WEEMES	Last name:		
Company (optional):		Company (optional):		
Unit:	House number: 4 House suffix:	Unit: House House suffix:		
House name:		House name:		
Address 1:	HAMMOND DRIVE	Address 1:		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	READ	Town:		
County:	LANCS	County:		
Country:		Country:		
Postcode:	138 12 7RE	Postcod e:		

3. Description of Proposed Works

Please describe the proposed works:

REMOVAL OF EXISTING ROOF COVERING, EXTENSION TO EXISTING BRICKWORK AT FIRST FLOOR LEVEL, CONSTRUCTION OF IEW GROUND + FIRST FLOOR EXTENSION AND NEW GARAGE

3. Descri	ption of Proposed Works (continued)	
Has the wo	rk already started? Yes No	1
If Yes, pleas	e state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the wo	rk already been completed?	
If Yes, pleas	e state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Ad	ddress Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provi	ide 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:		proposed to or from the public highway? Yes No Do the proposals require any diversions,
Address 1:	HAMMOND DRNE	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:	READ	
County:	LANCS	
Postcode (optional):	BB12 7RE	
you were giv application n Please tick if	complete the following information about the advice ren. (This will help the authority to deal with this nore efficiently). the full contact details are not then complete as much possible:	development? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Reference:		
•	Date (DD MM YYYY): -application submission) e pre-application advice received:	Will any trees or hedges need to be removed or pruned in order to carry out your proposal? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale.
	osed works affect arking arrangements? Yes No	9. Authority Employee / Member 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 the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	Don't Know		
Walls	RENDER, ARTIFICIAL STONE SECTIONS	RENDER BASE SECTION, GABO AND REAR. NATURAL STONE FIRST FOOD	€			
Roof	CONCRETE TILÉ	CONCRETE TILE				
Windows	URVC	UPYC				
Doors	UPVC	UPVC				
Boundary treatments (e.g. fences, walls)	STONE					
Vehicle access and hard-standing	BITMAC	BITMAC				
Lighting			Y	, _		
Others (please specify)						
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No f Yes, please state references for the plan(s)/drawing(s)/design and access statement:						

11: Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding** NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 2015/14. CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner and/or agricultural tenant to fany part of the land or building to which this application relates. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant **Date Notice Served**

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

Town and Country Planning (De I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been the land or building, or of a part *"owner" is a person with a freehold intere	Agricultural Land Declaration (concerning the Concerning Concernin	RTIFICATE C ngland) Order 2010 Certifica s of the other owners* and/or a nable to do so. left to run.				
Name of Owner / Agricultural Tenant	Address		Date Notice Served			
Netice of the conflication has been public	shoot in the fallowing payments	On the Sellerine state (cds)	the manufacture and the continu			
Notice of the application has been publis (circulating in the area where the land is:	situated):	On the following date (which than 21 days before the date)	e of the application):			
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):			
Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. ""owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ""agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were:						
Notice of the application has been publish (circulating in the area where the land is si		On the following date (whice than 21 days before the date	h must not be earlier e of the application):			
	· · · · + a <u></u> -					
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):			
12. Planning Application Require	ements - Checklist		<u> </u>			
Please read the following checklist to make information required will result in your app the Local Planning Authority has been sub	e sure you have sent all the information in plication being deemed invalid. It will not mitted.	support of your proposal. Fail be considered valid until all in	ure to submit all formation required by			
The original and 3 copies of a completed and dated application form: The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	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 Listed Building:	The correct fee: The original and 3 co completed, dated Ov Certificate (A, B, C or applicable) and Artic	nership D – as			
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:		Certificate (Agricultu				

13. Declaration		
I/we hereby apply for planning permission/consent as described in t information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the	
Signed - Applicant: Or signed - Agent.	: Date (DD/MM/YYYY):	
C Wells	20/5/14. (date cannot be pre-application	
14. Applicant Contact Details	15. Agent Contact Details	
Telephone numbers	Telephone numbers	
Country code: National number: Extension number:	Country code: National number: Extension number:	
44 07958 786266		
Country code: Mobile number (optional):	Country code: Mobile number (optional):	
Country code: Fax number (optional):	Country code: Fax number (optional):	
Em ail address (optional):	Email address (optional):	
	1	
16. Site Visit		
Can the site be seen from a public road, public footpath, bridleway or	other public land? Yes No	
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Applicant Other (if different from the agent/applicant's details)	
If Other has been selected, please provide:	•	
Contact name:	Telephone number:	
Em ail address:		