

15 FER 2018 ATTENTION OF

For office use only Application No.

Date received 15.2.16

Fee paid £172-30 Receipt No: 2476

Church Walk, Clitheroe, Lancashire, BB7 2RA Tel: 01200 425111

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.

| Title: MP First name: MALCOCM.  Last name: VALCHALL.  Company (optional):  Unit: House number: Suffix:  House name: AUSTIL HOUSE NAME First name: STEPHEN  Title: MR First name: STEPHEN  Company (optional):  Unit: House number: Suffix:  House name: ROSEDALLE  Address 1: MALT KILH. LANC  Address 2: Address 2: Address 3:  Town: Chipping Town: Clipping  County: ANCS  County: County: County:  Portrode: DRZ 22 R2   | 1. Appli               | cant Name and Address   | 2. Agent Name and Address     |
|--|------------------------|-------------------------|-------------------------------|
| Company (optional):  Unit: House number: House suffix:  House name: Austin House suffix:  Address 1: Malt Kilm. Lane Address 2: Address 3:  Town: Chippine  Company (optional):  Unit: House number: suffix:  House name: Posebale  Address 1: Baek lane  Address 2: Address 3:  Town: Chippine  County: Lane  County: Lane  County: Country:  | Title:                 | MB First name: MALCOLM. | Title: MR First name: STEPHEN |
| (optional):  Unit: House number: House suffix:  House name: AUSTILL HOUSE NALT KILL. LANE  Address 1: MALT KILL. LANE  Address 3:  Town: Chipping  County: LANES  Country: Country:  Country: Country:  Country: Country:  Country: Country: Country:  Country: Country: Country:  Country: Country: Country: Country:  Country: Countr | Last name:             | VAUCHAM.                | Last name: BIALEEKI           |
| House name:  Address 1: MALT KILM. LANG.  Address 2: Address 3:  Town: Chipping County:  County: (ANCS  County: County:  Count | Company<br>(optional): | •                       |                               |
| name: AUSTIN HOUSE  Address 1: MALT KILH. (AME  Address 2: Address 2: Address 3:  Town: Chippine  County: (ANCS  Country: Country:  Country: Country:  Country: Country: Country:  | Unit:                  |                         | TI Unit:                      |
| Address 2: Address 3: Address 3: Town: Chippine Town: County: LANCS  County: LANCS  Country:  |                        | AUSTIN HOUSE            | 11 14 のでき トイーの                |
| Address 3:  Town: Chippine Town: Cuttlese County: Coun | Address 1:             | MALT KILM. LAWE         | Address 1: BACK LANCE         |
| Address 3:  Town: Chippine Town: Cuttles 2  County: LANCS  Country: Country: Country:  | Address 2:             |                         | Address 2: ERILIDLETED        |
| County: LANCS County: LANCE  Country: Country:   | Address 3:             |                         | Address 3:                    |
| Country: Country:  | Town:                  | Chippine                | Town: CLITHERE                |
|  | County:                | LANCS                   | County: Licel                 |
| Postcodo: D22 2 2  | Country:               |                         | Country:                      |
| Postcode: ISIS+ CERZ   | Postcode:              | PR3 ZEP                 | Postcode: BB4 LLRZ            |

## 3. Description of Proposed Works

Please describe the proposed works:

THEO STURE-



| 3. Descri                     | ption of Proposed Works (continued)  | 0001001710  |
|-------------------------------|--|---|
| Has the wor                   | k already started? Yes No  | 3201601/11  |
| If Yes, please                | e state when the work was started (DD/MM/YYYY):  | (date must be pre-application submis  |
| 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 submiss   |
| 4. Site Ad                    | ldress Details   | 5. Pedestrian and Vehicle Access, Roads and Rights of   |
| Please provi                  | de 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 Is a new or altered pedestrian access   |
| House<br>name:                | AUSTIN HOUSE   | proposed to or from the public highway? Yes Do the proposals require any diversions,  |
| Address 1:                    | MALT KILM LAME   | 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:                         | CHIPPINE   |   |
| County:                       | LANCS  |   |
| Postcode (optional):          | PR3 26P  |   |
| 6. Pre-api                    | plication Advice   | 7. Trees and Hedges   |
|                               | ce or prior advice been sought from the local  | Are there any trees or hedges on your own   |
|                               | out this application? Yes No   | property or on adjoining properties which   |
| you were giv<br>application n | 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 | are within falling distance of your proposed development?  If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings: |
|                               | then complete as much possible:  |   |
| Officer name                  | 2:   |   |
|                               |  |   |
| Reference:                    |  | ·   |
|                               |  | Will any trees or hedges need to be removed or pruned in  |
| )X                            | Date (DD MM YYYY):   | order to carry out your proposal?   |
|                               | -application submission) e pre-application advice received:  | If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plant   |
|                               |  | drawing(s) and indicate the scale.  |
| 1 1                           |  |   |
|                               |  |   |
|                               |  |   |
|                               |  |   |
| 8. Parking                    |  | 9. Authority Employee / Member  |
| Will the prope                | 1 "  |   |
|                               | osed works affect  | With respect to the Authority, I am:  |
| If Yes, please                | osed works affect<br>arking arrangements? Yes No   |   |
| If Yes, please                | osed works affect<br>arking arrangements? Yes No   | With respect to the Authority, I am:  (a) a member of staff  Do any of these  |
| If Yes, please                | osed works affect<br>arking arrangements? Yes No   | With respect to the Authority, I am:  (a) a member of staff  (b) an elected member  (c) related to a member of staff  (b) Tyes  |
| If Yes, please                | osed works affect<br>arking arrangements? Yes No   | 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                  |

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|   | Existing<br>(where applicable)   | Proposed       | Not |   | Don'<br>Knov |
|---|--|----------------|-----|---|--------------|
| Walls                                       | STONE REMARK   | STONE REHDER   |     | ] |              |
| Roof  | BLUE SLATE   | Blue Slate     |     |   |              |
| Windows                                     | Timber   | TIMBEL         | Ē   | ] |              |
| Doors                                       | TIMBEL   | TIMBER         |     |   |              |
| Boundary treatments<br>(e.g. fences, walls) | MIA  | HIM            |     | ] |              |
| Vehicle access and hard-standing            | μlų  | иlч            |     |   |              |
| Lighting                                    | riju   | иІц            |     |   |              |
| Others<br>(please specify)                  |  |                |     | ] |              |
| If Yes, please state refe                   | ditional information on submitted plan(s)/drawing erences for the plan(s)/drawing(s)/design and according to the plan to the p | ess statement: | Yes |   | No           |



## 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, 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.

| Signed - Applicant:  | Or signed - Agent:  | tion 65(8) of the Act.  Date (DD/MM/YY   |
|--|---|--|
|  | 413   | 15/02/16   |
| 21 days before the date of this application relates.  * "owner" is a person with a freehold in | CERTIFICATE OF OWNERSHIP - CERTIFICATE B (Development Management Procedure) (England) Order 2010 I have/the applicant has given the requisite notice to everyone elecation, was the owner* and/or agricultural tenant** of any part of the tenant of tenant of the tenant of tenant of the tenant of tenant of the tenant of the tenant of tenant of the tenant of tenant | Certificate under Article 12<br>se (as listed below) who, on the<br>of the land or building to which |
| Name of Owner / Agricultural Tena  |   | Date Notice Serve  |
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| · · · · · · · · · · · · · · · · · · ·  | Agricultural Land Declaration (<br>CERTIFICATE OF OWNERSHIP - CE<br>velopment Management Procedure) (  | RTIFICATE  | te under Article 12                           |
| <ul> <li>I certify/ The applicant certifies that:</li> <li>Neither Certificate A or B can be</li> <li>All reasonable steps have been the land or building, or of a part</li> <li>* "owner" is a person with a freehold interest</li> </ul> | issued for this application<br>taken to find out the names and address<br>of it, but I have/ the applicant has been of<br>the st or leasehold interest with at least 7 years | es of the other owners* and/or a<br>unable to do so.<br>s left to run.         |   |
| ** "agricultural tenant" has the meaning g   | iven in section 65(8) of the Town and Coun   | try Planning Act 1990  |   |
| The steps taken were:  |  |  | /   |
|  |  |  |   |
| Name of Owner / Agricultural Tenant  | Address  | 5  | Date Notice Served                            |
|  |  |  |   |
|  |  |  |   |
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|  |  |  |   |
| Notice of the application has been publi   | shed in the following newspaper  | On the following date (whi   | ch must not be earlier                        |
| (circulating in the area where the land is   | situated):   | than 21 days before the da   | te of the application):                       |
|  |  |  | 200,23  |
| Signed - Applicant:  | Or signed - Agent:   |  | Date (DD/MM/YYY)                              |
|  |  |  |   |
| Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the c have/ the applicant has been una   | aken to find out the names and addresse<br>owner* and/or agricultural tenant** of a  | s of everyone else who, on the cay part of the land to which this left to run. | lay 21 days before the                        |
|  |  |  |   |
| Notice of the application has been publis<br>circulating in the area where the land is s   | hed in the following newspaper<br>situated):   | On the following date (whi<br>than 21 days before the da                       |   |
|  |  |  |   |
| Signed - Applicant:  | Or signed - Agent:   |  | Date (DD/MM/YYYY)                             |
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| information required will result in your ap  | ke sure you have sent all the information oplication being deemed invalid. It will n   | in support of your proposal. Fa<br>ot be considered valid until all i          | ilure to submit all<br>nformation required by |
| the Local Planning Authority has been su<br>The original and 3 copies of a<br>Completed and dated application form:  | bmitted.  The original and 3 copies of a design and access statement if  | The correct fee:   | Ę   |
| The original and 3 copies of a plan which dentifies the land to which the application elates drawn to an identified scale and showing the direction of North:  | proposed works fall within a   | Certificate (A, B, C o   | Ownership<br>r D – as                         |
| and snowing the direction of North:<br>The original and 3 copies of other plans<br>and drawings or information necessary to<br>describe the subject of the application:  |  | applicable) and Arti<br>Certificate (Agricult                                  | cle 12  |

| information. I/we confirm that, to the best of my/our kingenuine opinions of the person(s) giving them.   | described in th<br>lowledge, any<br>gned - Agent: | this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the  t:  Date (DD/MM/YYYY):  (date cannot pre-applicati |
|---|---|--|
| 14. Applicant Contact Details  Telephone numbers  Country code: National number:  O 1995  | Extension<br>number:                              | Telephone numbers  Country code: National number: Extension number  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):         |
| 16. Site Visit  Can the site be seen from a public road, public footpat  If the planning authority needs to make an appointme out a site visit, whom should they contact? (Please sele If Other has been selected, please provide:  Contact name: | ent to carry                                      | or other public land? Yes No Agent Applicant Other (if different from agent/applicant's detail   |

