

For office use only
Application No.

Date received 11.12.17

Fee paid £ 172.30 Receipt No: 0297277

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: | MC AND Mes First name: | Title: MR First name: STVART | | |
| Last name | " SOLOMON | Last name: HEED | | |
| Company (optional): | | Company (optional): SUNDERLAND PEACOCK & ASSOC LTD | | |
| Unit: | House House suffix: | Unit: House House suffix: | | |
| House name: | LOWER BARN FARM | House name: HAZELMERE | | |
| Address 1: | WHALLEY ROAD | Address 1: PIMLICO BOAD | | |
| Address 2: | SABDEN | Address 2: | | |
| Address 3: | | Address 3: | | |
| Town: | NR CLITHERDE | Town: CLIPPEROE | | |
| County: | LANCASTILLE | County: LANKS. | | |
| Country: | | Country: | | |
| Postcode: | BB7 9DT | Postcode: BB7 2A9 | | |
| 3. Description of Proposed Works | | | | |

Please describe the proposed works:

DEMOLITION OF EXITING REAR POOL HOUSE of GYMNASIUM. ELECTION OF A SINGLE STOREY REAR EXTENSION TO PROVIDE ADDITIONAL FAMILY SPACE, GYMNASIUM AND DINING AREA. FENESTRATION ADDRESSIONS TO THE FRONT ELECUTION. AND RE-ROOFING WORL TO THE REAR

| 3. Description of Proposed Works (continued) | |
|------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|
| Has the work already started? | |
| If Yes, please state when the work was started (DD/MM/YYYY): | |
| Has the work already been completed? | (date must be pre-application submission) |
| 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 V No |
| House name: LOWER BARN FARM | Is a new or altered pedestrian access proposed to or from the public highway? Yes No |
| Address 1: Whaley ROAD | Do the proposals require any diversions, extinguishments and/or creation of public |
| Address 2: SABOEN | rights of way? Yes No |
| Address 3: | If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/ drawing(s): |
| Town: NR CLITHERCE | |
| County: | |
| Postcode (optional): B37 9DT | |
| 6. Pre-application Advice | |
| Has assistance or prior advice been sought from the local | 7. Trees and Hedges |
| authority about this application? Yes No | Are there any trees or hedges on your own property or on adjoining properties which |
| | are within falling distance of your proposed |
| If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this | development? Yes No |
| application more efficiently). | If Yes, please mark their position on a scaled |
| Please tick if the full contact details are not known, and then complete as much possible: | plan and state the reference number of any plans or drawings: |
| Officer name: | |
| | |
| Reference: | |
| | Will any trees or hedges need |
| Date (DD MM YYYY): | to be removed or pruned in |
| (must be pre-application submission) | |
| Details of the 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 plan(s)/ |
| | drawing(s) and indicate the scale. |
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| B. Parking | |
| Nill the proposed works affect | 9. Authority Employee / Member With respect to the Authority, I am: |
| evicting car parking arms a man a | a) a member of staff Do any of these |
| f Yes, please describe: | b) an elected member statements apply to you? |
| | c) related to a member of staff d) related to an elected member Yes No |
| 111 | f Yes, please provide details of the name, relationship and role |
| | |
| | |
| | |

| | tate what materials are to be used externally. Inc | iude type, colour and name for each material: | | |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|--------|
| | Existing (where applicable) | Proposed | Not | Do Kno |
| Walls | STONE | STONE WITH DRECTED STONE HEADS & CILLS TO MATCH. | | |
| Roof | SLATE | • SLATE PITCHED ECOF TO MATELY • ZINC SHEET TO FLAT ECOES WITH DARK GREY ALLMINIUM ROOFLIGHT • DARK GREY ALLMINIUM PROFILE EARS DETAIL TO DINING ROOM AND RUG'S. | | |
| Windows | TIMBER | TIMBER / ALLMINIUM FRAMET | | |
| Doors | TIMBER | TIMBER / PRUMINIUM. FRAMES | | |
| Boundary treatments (e.g. fences, walls) | - | | V | |
| /ehicle access and hard-standing | | | | |
| ighting | | | T | |
| thers olease specify) | | | V | |
| e you supplying additi | onal information on submitted plan(s)/drawing(s nces for the plan(s)/drawing(s)/design and acces | s)/design and access statement? Yes | |] No |
| RAWINGS 5446. We LOCATION PLAT | | EY REPORT | | |

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. st "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); 2017 **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** of any 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 Address **Date Notice Served**

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

| 1. Ownership Certificates and | Agricultural Land Declaration | | | | | | |
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| Town and Country Planning (D | CERTIFICATE OF OWNERSHIP - C | ERTIFICATE C | | | | | |
| Legitive The applicant cartifics that | evelopment Management Procedure) | (England) Order 2010 Certifica | ite under Article 12 | | | | |
| I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application | | | | | | | |
| AN reasonable steps have been | All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the language of the langua | | | | | | |
| | | | agricultural tenants** of | | | | |
| while is a person with a freehold inferi | PST Or IPASPHOLD interest with at least 7 year | ve laft ta vun | | | | | |
| agricultural tenant has the meaning of | given in section 65(8) of the Town and Cou | ntry Planning Act 1990 | | | | | |
| The steps taken were: | | | | | | | |
| | And the second s | | | | | | |
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| Name of Owner / Agricultural Tenant | | | T | | | | |
| The state of the s | Addres | SS | Date Notice Served | | | | |
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| Notice of the application has been public | ahadiada 6.II | | | | | | |
| Notice of the application has been public (circulating in the area where the land is | situated): | On the following date (which | h must not be earlier | | | | |
| , and a second s | situated). | than 21 days before the dat | e of the application): | | | | |
| | | | | | | | |
| Signed - Applicant: | 2: 11 | | | | | | |
| Signed - Applicant. | Or signed - Agent: | | Date (DD/MM/YYYY): | | | | |
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| | CERTIFICATE OF OWNERSHIP - CER | TIEICATE D | | | | | |
| Town and Country Planning (Dev | elopment Management Procedure) (E | ngland) Order 2010 Contificate | | | | | |
| | | ingland) Order 2010 Certificate | under Article 12 | | | | |
| Certificate A cannot be issued for | this application | | | | | | |
| All reasonable steps have been tal | ken to find out the names and addresses | s of everyone else who, on the da | y 21 days before the | | | | |
| have/ the applicant has been unal | | ıy part ð€ the land to which this a | pplication relates, but I | | | | |
| "owner" is a person with a freehold interest | or leasehold interest with at least 7 years I | oft to run | | | | | |
| "agricultural tenant" has the meaning give | en in section 65(8) of the Town and Countr | v Plannina Act 1990 | | | | | |
| he steps taken were: | , , |) | | | | | |
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| otice of the application has been publish | ed in the following newspaper | On the following date which | n must not be garlier | | | | |
| otice of the application has been publish irculating in the area where the land is sit | ed in the following newspaper tuated): | On the following date (which than 21 days before the date | n must not be earlier | | | | |
| otice of the application has been publish circulating in the area where the land is sit | ed in the following newspaper tuated): | On the following date (which than 21 days before the date | n must not be earlier of the application): | | | | |
| otice of the application has been publish irculating in the area where the land is sit | ed in the following newspaper tuated): | On the following date (which than 21 days before the date | n must not be earlier of the application): | | | | |
| circulating in the area where the land is si | tuated): | On the following date (which than 21 days before the date | of the application): | | | | |
| circulating in the area where the land is si | oed in the following newspaper tuated): Or signed - Agent: | On the following date (which than 21 days before the date | n must not be earlier of the application): Date (DD/MM/YYYY): | | | | |
| circulating in the area where the land is si | tuated): | On the following date (which than 21 days before the date | of the application): | | | | |
| irculating in the area where the land is si | tuated): | On the following date (which than 21 days before the date | of the application): | | | | |
| greating in the area where the land is si | Or signed - Agent: | On the following date (which than 21 days before the date | of the application): | | | | |
| gned - Applicant: 2. Planning Application Require | Or signed - Agent: | than 21 days before the date | Date (DD/MM/YYYY): | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make | Or signed - Agent: erments - Checklist essure you have sent all the information is | than 21 days before the date | Date (DD/MM/YYYY): | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app | Or signed - Agent: erments - Checklist es sure you have sent all the information in plication being deemed invalid. It will no | than 21 days before the date | Date (DD/MM/YYYY): | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your apple Local Planning Authority has been sub- | Or signed - Agent: ements - Checklist e sure you have sent all the information in indication being deemed invalid. It will no mitted. | n support of your proposal. Failuit be considered valid until all info | Date (DD/MM/YYYY): ure to submit all ormation required by | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app e Local Planning Authority has been sub- te original and 3 copies of a | Or signed - Agent: ements - Checklist e sure you have sent all the information in indication being deemed invalid. It will no mitted. The original and 3 copies of a | n support of your proposal. Failuit be considered valid until all info | Date (DD/MM/YYYY): ure to submit all ormation required by | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app e Local Planning Authority has been sub- e original and 3 copies of a mpleted and dated application form: | Or signed - Agent: Prements - Checklist Is sure you have sent all the information in polication being deemed invalid. It will no mitted. The original and 3 copies of a design and access statement if proposed works fall within a | than 21 days before the date | Date (DD/MM/YYYY): ure to submit all ormation required by | | | | |
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| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app e Local Planning Authority has been subrate original and 3 copies of a empleted and dated application form: the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which | Or signed - Agent: Or signed - Agent: Ements - Checklist E sure you have sent all the information in indication being deemed invalid. It will no mitted. 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 | n support of your proposal. Failut be considered valid until all info | Date (DD/MM/YYYY): Date (DD/MM/YYYY): Date to submit all ormation required by Dies of the nership | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app e Local Planning Authority has been subr the original and 3 copies of a mpleted and dated application form: the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which the original and 3 copies of a plan which | Or signed - Agent: Prements - Checklist Is sure you have sent all the information in indication being deemed invalid. It will no mitted. The original and 3 copies of a design and access statement if proposed works fall within a conservation area or | n support of your proposal. Failuit be considered valid until all info The correct fee: The original and 3 copy completed, dated Ow Certificate (A, B, C or D | Date (DD/MM/YYYY): Date (DD/MM/YYYY): Date to submit all ormation required by 2 – 00 Date of the nership 0 – as | | | | |
| gned - Applicant: 2. Planning Application Require ease read the following checklist to make formation required will result in your app e Local Planning Authority has been sub- ne original and 3 copies of a impleted and dated application form: ne original and 3 copies of a plan which entifies the land to which the application lates drawn to an identified scale d showing the direction of North: e original and 3 copies of other plans | Or signed - Agent: Or signed - Agent: Ements - Checklist E sure you have sent all the information in indication being deemed invalid. It will no mitted. 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 | The correct fee: The original and 3 copy completed, dated Ow Certificate (A, B, C or Dapplicable) and Article | Date (DD/MM/YYYY): Date (DD/MM/YYYY): Date to submit all ormation required by 2 - 00 Dies of the enership 2 - as 2 12 | | | | |
| lotice of the application has been publish circulating in the area where the land is sit igned - Applicant: 2. Planning Application Require lease read the following checklist to make formation required will result in your applie Local Planning Authority has been subme original and 3 copies of a pmpleted and dated application form: the original and 3 copies of a plan which entifies the land to which the application lates drawn to an identified scale and showing the direction of North: the original and 3 copies of other plans and drawings or information necessary to escribe the subject of the application: | Or signed - Agent: Or signed - Agent: Ements - Checklist E sure you have sent all the information in indication being deemed invalid. It will no mitted. 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 | n support of your proposal. Failuit be considered valid until all info The correct fee: The original and 3 copy completed, dated Ow Certificate (A, B, C or D | Date (DD/MM/YYYY): Date (DD/MM/YYYY): Date to submit all ormation required by 2 - 00 Dies of the enership 2 - as 2 12 | | | | |

| 13. Declaration | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|--|--|--|--|--|
| I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. | | | | | | |
| Signed - Applicant: Or signed - Agen | t: Date (DD/MM/YYYY): | | | | | |
| Mnderlan | , / | | | | | |
| 14. Applicant Contact Details | 15. Agent Contact Details | | | | | |
| Telephone numbers Extension | Telephone numbers | | | | | |
| Country code: National number: number: | Country code: National number: Extension number: | | | | | |
| | 01200 423178 | | | | | |
| Country code: Mobile number (optional): | Country code: Mobile number (optional): | | | | | |
| | | | | | | |
| Country code: Fax number (optional): | Country code: Fax number (optional): | | | | | |
| | | | | | | |
| Email address (optional): | Email address (optional): | | | | | |
| | struct e sunderland peacock. com | | | | | |
| 16. Site Visit | | | | | | |
| Can the site be seen from a public road, public footpath, bridleway or other public land? | | | | | | |
| If the planning authority needs to make an appointment to carry | | | | | | |
| out a site visit, whom should they contact? (Please select only one) | Agent Applicant Other (if different from the agent/applicant's details) | | | | | |
| Control has been selected, please provide: | | | | | | |
| Corract name. | Telephone number: | | | | | |
| | | | | | | |
| mail address: | | | | | | |