

For office use only
Application No.

Date received

Fee paid £ Receipt No:

First name: GAYLE

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

JEREMY

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.

First name:

1. Applicant Name and Address

MR

Title:

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

Title:

2. Agent Name and Address

Last name:	HOLLAND	Last name:	bheber		
Company (optional):		Company (optional):	DC & MG ASSOCIATES LID		
Unit:	House number: 6 House suffix:	Unit:	House House suffix:		
House name:		House name:			
Address 1:	SALISBURY ANENUE	Address 1:	THE ANNEXE		
Address 2:		Address 2:	REAL OF 29 STUTION ROMO		
Address 3:		Address 3:			
Town:	Geim Shram	Town:	KIEKMAN		
County:		County:	UANCHSMIRE		
Country:	ENGILAND	Country:			
Postcode:	Postcode: PEL 2NA				
	ption of Proposed Works				
	ribe the proposed works:				
	ission of previous application 3/2018/0214				
1	NO STOREY, PART SINCRE STOREY REAR AND SIDE ADDITIONAL BEDROOM AND EXTRA LIVING SPACE		to cleate granodalents		
Million, Moderation and States States					
Improved the second of the sec					
			n / NUV 2019		
		ATT	Q.A. a. a.		
\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$					

3. Description of Proposed Works (continued)			
Has the work already started?			
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)		
Has the work already been completed?			
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 number: 28 House suffix:	proposed to or from the public highway? Yes No  Is a new or altered pedestrian access		
House name: PENGAETM	proposed to or from the public highway? Yes V No		
Address 1: DILWOUTH AWE	Do the proposals require any diversions, extinguishments and/or creation of public rights of way?  Ves V No		
Address 2:	rights of way? Yes V No  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: LONGRELIDGE			
County:			
Postcode (optional): PR3 357			
Has assistance or prior advice been sought from the local authority about this application?  If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).  Please tick if the full contact details are not known, and then complete as much possible:  Officer name:  HALLET McCACINEY  Reference:  SITE MEETING 18.08.18   E-MAIL 24.08.18  Date (DD MM YYYY):  (must be pre-application submission)  Details of the pre-application advice received:  AMENDMENTS TO LOOK PESIGN - NUPPOD LOOK TO EXCONSION  PRICHED LOOK TO SIMILE STARCY  ELEMENT  INTRODUCE PENNAM SCHEEN TO REAL OF SMILLONG TO ADVIOUSE  AMENDMENT TO WINDOWS ON NORTH ELEMANN  PRICHED LOOK TO SIMILE STARCY  ELEMANN  INTRODUCE PENNAM SCHEEN TO REAL OF SMILLONG TO ADVIOUSE  AMENDMENT TO WINDOWS ON NORTH ELEMANN	Are there any trees or hedges on your own property or on adjoining properties which 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:  PLEASE SEE DEANING: 18 0525 PNOOL DEV & PROPOSED SITE LANGUT.  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.		
8. Parking  Will the proposed works affect existing car parking arrangements?  Yes No  If Yes, please describe:  PEPLACEMENT GMEAGE TO SE CONSTIBUCTION AS POL DEAWING: IS 0528 PROS1 BEY & PLOAGRED STIE LANGUT.	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		LED EMOOTH BLICK			
Roof	SUATE TILES	SII			
Windows	WHITE UPVC	ANTREACTE GREY UPIC			
Doors	MAIN DOOR FOR ENTENNIE RUCK TIMBER FRAME EFFECT UPIC POOR IN WATTE FRAME, RITICHEN BOOK WATTE UPIC	ANTREACTE GREY UPVC			
Boundary treatments (e.g. fences, walls)	PARK EDD I BEONN BRICH TO FRONT NEDGES TO SUBES AND STONE WALL TO REAR.				
Vehicle access and hard-standing	THELIAC DRIVE, STONE FLAG APTIO	THEMIC PRIVEWAY, STONE FLACE	PATLO		
Lighting					
Others (please specify)					
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?  Yes No  Yes, please state references for the plan(s)/drawing(s)/design and access statement:  PN201 ECX C. PROPESSED ENCYPTIONS  PN NOZ. PROPESSED (N FORMALION VISUAL)					

## 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.

	given by reference to the definition of "agricultural tenant" in section	n 65(8) of the Act.
	Or signed - Agent:	Date (DD/MM/YYYY):
		06/11/2018
I certify/ The applicant certifies that I ha 21 days before the date of this applicati application relates. * "owner" is a person with a freehold intere	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2010 C ve/the applicant has given the requisite notice to everyone else on, was the owner* and/or agricultural tenant** of any part of st or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1990	(as listed below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

I certify/ The applicant certifies that:  Neither Certificate A or B can be a All reasonable steps have been to	CERTIFICATE OF OWNERSHIP - CER relopment Management Procedure) (Exissued for this application aken to find out the names and addresses of it, but I have/ the applicant has been up to reasehold interest with at least 7 years if	TIFICATE C ngland) Order 2010 Certificat of the other owners* and/or a nable to do so. eft to run.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
Notice of the application has been publisl (circulating in the area where the land is s	hed in the following newspaper ituated):	On the following date (whice than 21 days before the date	ch must not be earlier te of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
I certify/ The applicant certifies that:  Certificate A cannot be issued for the All reasonable steps have been taken to be a compared to the certification.	ken to find out the names and addresses on wner* and/or agricultural tenant** of any pole to do so. or leasehold interest with at least 7 years les	gland) Order 2010 Certificate of everyone else who, on the di part of the land to which this a to run.	av 21 days before the
Notice 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 (whice than 21 days before the date	h must not be earlier e of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
12. Planning Application Require Please read the following checklist to make information required will result in your app	e sure you have sent all the information in dication being deemed invalid. It will not	support of your proposal. Fai be considered valid until all in	lure to submit all formation required by
the Local Planning Authority has been sub- 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 other plans and drawings or information necessary to describe the subject of the application:	The original and 3 copies of a design and access statement if proposed works fall within a conservation area or	The correct fee:  The original and 3 completed, dated On Certificate (A, B, C or applicable) and Artic Certificate (Agricultum)	wnership D – as :le 12

13. Declaration					
I/we hereby apply for planning permission/cons information. I/we confirm that, to the best of my	ent as described in th /our knowledge, any	nis form and the a facts stated are to	ccompanying plans/drawi rue and accurate and any c	ngs and additional opinions given are the	
genuine opinions of the person(s) giving them.			,		
Signed - Applicant:	Or signed - Agent:		Date (DD/M	M/YYYY):	
	Cathana		06/11/	20% (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:	Michael	Extension	
Country code: National number:	number:	Country code.	National number:	number:	
Country and a Male Harry was been found in a 10		Country code	01772 68603		
Country code: Mobile number (optional):		Country code:	Mobile number (optional	11):	
Courtment 5 to 1 to 1 to 2		Ct1			
Country code: Fax number (optional):		Country code:	Fax number (optional):		
		r y dd.			
Email address (optional):		Email address (optional):			
(	J	L			
16. Site Visit					
Can the site be seen from a public road, public fo	otpath, bridleway or	other public land	? 🗸 Yes 🔲 N	lo	
				Other (if different from the gent/applicant's details)	
If Other has been selected, please provide:				<b>3</b>	
Contact name:	Telephone number:				
Email address:					