

For office use only
Application No.3/2020/1064

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Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2RA Tel: 01200 425111 www.ribblevalley.gov.u

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

MRHALS First name: JOHN + ANNE.

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.

1. Applicant Name and Address

Title:

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

2. Agent Name and Address

First name:

Last name: WAUKER	Last name:
Company	Company
(optional):	(optional):
Unit: House number: 16 House suffix:	Unit: House number: House suffix:
House name:	House name:
Address 1: SPKINABROOK	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: CLITHEROC	Town:
County:	County:
Country:	Country:
Postcode: BB7 IGZ	Postcode:
3. Description of Proposed Works	
Please describe the proposed works:	
PROPOSED LOUNGE UTILITY	ENDE EXTENSION
	•
,	
	\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

3. Description of Proposed Works (continued)	(4)
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 proposed to or from the public highway? Yes No
Unit: House number: 16 House suffix:	Is a new or altered pedestrian access
House name:	proposed to or from the public highway? Yes V No Do the proposals require any diversions,
Address 1: SPRNGBROOK	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: CUTHEROÉ	
County:	Select Fire No. 55
Postcode (optional): BB7 192	· _ = ·
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: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	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: 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:	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

Walls			Not applicable	Know
	BRICKWORK	BRICKWORK		
Roof	conclete tives	CONCRETE TILES		
Windows	UNC	UPVC		
Doors	olic	URC		
Boundary treatments (e.g. fences, walls)	ę			
Vehicle access and hard-standing			ď	
Lighting			d	
Others (please specify)			Ŋ	
	onal information on submitted plan(s)/drawinces for the plan(s)/drawing(s)/design and a		Yes	No

11. Ownership Certificates and Agricultural	Land Declaration	, All C
CERTIFICA	r D, must be completed with this application form TE OF OWNERSHIP - CERTIFICATE A	
Legify/The applicant certifies that on the day 21 days be	nagement Procedure) (England) Order 2010 Certificate efore the date of this application nobody except myself/the pplication relates, and that none of the land to which the a	e applicant was the
NO ¹ app	riate, if you are the sole owner of the land or building to cultural holding.	o which the
* "OI ** "¢	erest with at least 7 years left to run. to the definition of "agricultural tenant" in section 65(8) of the	he Act.
Sigi	Or signed - Agent:	Date (DD/MM/YYYY):
		08/12/2020
I ce 21 d appl	agement Procedure) (England) Order 2010 Certificate has given the requisite notice to everyone else (as listed er* and/or agricultural tenant** of any part of the land of the	below) who, on the day
* "Ov ** "a	erest with at least 7 years left to run. 8) of the Town and Country Planning Act 1990	
Ne	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	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 (co CERTIFICATE OF OWNERSHIP - CERT velopment Management Procedure) (En issued for this application taken to find out the names and addresses of it, but I have/ the applicant has been un st or leasehold interest with at least 7 years leaven in section 65(8) of the Town and Country	of the other owners* and/or agable to do so.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
		11 9 5 v · 13	And the second second
Notice of the application has been public (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (which than 21 days before the date	n must not be earlier of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY);
 I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been ta date of this application, was the chave/ the applicant has been una "owner" is a person with a freehold interest 	ken to find out the names and addresses of owner* and/or agricultural tenant** of any	of everyone else who, on the day part of the land to which this a	v 21 days before the
Notice of the application has been publis (circulating in the area where the land is	hed in the following newspaper littrated):	On the following date (which than 21 days before the date	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
12. Planning Application Require Please read the following checklist to makinformation required will result in your apthe Local Planning Authority has been sulting the control of the con	ke sure you have sent all the information in oplication being deemed invalid. It will not	support of your proposal. Failube considered valid until all inf	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 design and access statement if	The correct fee:	208-00
The original and 3 copies of a plan which identifies the land to which the applicatio 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:	proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building:	The original and 3 coperations of the completed, dated Own Certificate (A, B, C or I applicable) and Articl Certificate (Agricultur	rnership O – as e 12

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
Signed - Applicant.	Or Figure Agents	(date cannot be pre-application
		ontact Details
		bers
		National number: Extension number:
		Attabile aurahan (a final)
		Mobile number (optional):
		Fax pumber (optional):
		optional):
16. Site Visit		
Can the site be seen from a public r	oad, public footpath, bridleway or other publ	lic land? Yes No
If the planning authority needs to n out a site visit, whom should they co	nake an appointment to carry ontact? (Please select only one)	gent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please p		
Contact name:	Telephon	ne number: