

Application for Planning Permission. Town and Country Planning Act 1990

'rivacy Notice

his form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting nformation to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning Development Management Procedure) (England) Order 2015 (as amended).

lease be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. An ubsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in greement with the declaration section.

loon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its bligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and ommercial requirements relating to information security and data protection of the information you have provided.

.ocal Planning Authority details:



For office use only Application No. 3/2021/0144 Date received Fee paid £ Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2RA

Tel: 01200 425111 www.ribblevalley.gov.uk

'ublication of applications on planning authority websites

nformation provided on this form and in supporting documents may be published on the authority's planning register and vebsite.

lease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require ny further clarification, please contact the Local Planning Authority directly.

printed, please complete using block capitals and black ink.

: is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your pplication.

| 1. Applic | ant Name and Address | 2. Agent Name and Address |
|------------------------|----------------------|------------------------------------------|
| Title: | MRS First name: AHNA | Title: First name: |
| Last name: | SCHOFIELD | Last name: |
| Company (optional): | | Company (optional): A.P. B BUILDING SURV |
| Unit: | House House suffix: | Unit: House number: House suff |
| House name: | | House name: |
| Address 1: | | Address 1: Maple Grove |
| Address 2: | | Address 2: RAMSBOTTOM |
| Address 3: | | Address 3: |
| Town: | | Town: Bury |
| County: | | County: |
| Country: | | Country: |
| Postcode: | | Postcode: BLO OAH |

3. Description of the Proposal

Please describe the proposed development, including any change of use:

PROPOSED DEMOLITION OF THE EXISTING BUNGALOW AND STABLUS/STORAGE BULL INGS AND THE CONSTRUCTION OF A HEW 4 BEDROOM HOUSE WITH ATTACHED CIARAGE

| | Yes No | | | | | |
|---------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| f Yes, please state the date when building, work or use were started (DD/MM/YYYY): | (date must be pre-application submission) | | | | | |
| las the building, work or change of use been completed? | Yes No | | | | | |
| f Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY): | (date must be pre-application submission) | | | | | |
| Reference no. of permission in principle being relied on (technical details consent applications only): | | | | | | |
| 4. Site Address Details | 5. Pre-application Advice | | | | | |
| Please provide the full postal address of the application site. | Has assistance or prior advice been sought from the local authority about this application? | | | | | |
| Unit: House house suffix: | authority about this application? Yes No | | | | | |
| House name: ASH CROFT | If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this | | | | | |
| Address 1: MILL LATE | application more efficiently). Please tick if the full contact details are not | | | | | |
| Address 2: | known, and then complete as much as possible: | | | | | |
| Address 3: | Officer name: | | | | | |
| Town: WADDINGTOH | LEE GREEN_WOOD | | | | | |
| County: LANCASHIRE | Reference: From Public Record, | | | | | |
| Postcode (SB7 337) | RV 2019 / EHQ 100081 | | | | | |
| (optional): Description of location or a grid reference. (must be completed if postcode is not known): | Date (DD/MM/YYYY): (must be pre-application submission) | | | | | |
| Easting: Northing: | Details of pre-application advice received? | | | | | |
| Description: | THE PROPOSET DEVELOPMENT WOULD BE ACCEPTABLE INT PRINCIPLE, | | | | | |

| 5. Pedestrian and venicie access, koads a | na kignts of way [| / . waste Storage and Collection | |
|------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|
| 's a new or altered vehicle access proposed to or from the public highway? | Yes No | Do the plans incorporate areas to store and aid the collection of waste? | Yes No |
| s a new or altered pedestrian access proposed to or from :he public highway? | Yes No | If Yes, please provide details: FOUR DUST SIN SPA AT THE FEO-TE DELUCE | |
| Are there any new public roads to be provided within the site? | Yes No | AT THE FEOTO DELUG | , 22 229 |
| Are there any new public ights of way to be provided within or adjacent to the site? | Yes No | | |
| Oo the proposals require any diversions 'extinguishments and/or creation of rights of way? | Yes No | Have arrangements been made for the separate storage and collection of recyclable waste? | Yes No |
| If you answered Yes to any of the above questio details on your plans/drawings and state the ref (s)/drawings(s) | ns, please show ference of the plan | If Yes, please provide details: | |
| BE EXTENSION BENEVIA B. Authority Employee / Member | of to 7.2m | | |
| t is an important principle of decision-making th | ugh that a fair-minde | n and transparent. For the purposes of this question d and informed observer, having considered the fac ocal planning authority. | i, "related to" cts, would |
| Do any of the following statements apply to you | and/or agent? Y | Ves No With respect to the authority, I ar (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 their name, role a | and how you are relate | ed to them. | |
| | | | |
| | | | |
| | | | |

| 9 | R/A | at | Or | 13 | IC |
|---|-----|----|----|----|----|
| | | | | | |

| fapplicable, please state what materials are to be used externally. Inclu | clude type, colour and name for each material: |
|---------------------------------------------------------------------------|------------------------------------------------|
|---------------------------------------------------------------------------|------------------------------------------------|

| | Existing (where applicable) | Proposed | Not applicable | Don't Know |
|---------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------|-------------------|---------------|
| Walls | TIMBER CLARPING | SALLESTONE PITCH FACE (RECLANINGS) | | |
| Roof | FELT COULTERS | RE-CUMED WELST | | |
| Windows | TIMEER & UPUC. | ALLIMITUM FRANKE WITH SAHD STORE HERDS, Jambs & CLUS | | |
| Doors | Timeser | Auminum/ GLASS | | |
| Boundary treatments (e.g. fences, walls) | HERGISS & STORE WALLS | NEW OPED 5 RACL FORCES & POETS, STEHE WAN TO REMAIN HEDGE TO REMAIN | | |
| Vehicle access and hard-standing | TARMAC | STONIE SOTS BLOCK | | |
| Lighting | | | | Ø |
| Others (please specify) | | | | |
| Are you supplying add | litional information on submitted plan(s)/drawing | (s)/design and access statement? | | No |
| • | rences for the plan(s)/drawing(s)/design and acce | | | |
| Demina | Dmd 03 Dmd 05 Dmd 05 | Access Statment | | |

10. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

| Type of Vehicle | Total Existing | Total proposed (including spaces retained) | Difference In spaces | |
|--------------------------------------------------|-------------------|--------------------------------------------|-------------------------|--|
| Cars | 1 | 3 | 2 | |
| Light goods vehicles/ public carrier vehicles | 70 | 0 | 0 | |
| Motorcycles | 0 | 0 | 0 | |
| Disability spaces | | 0 | 0 | |
| Cycle spaces | 0 | 0 | ۵ | |
| Other (e.g. Bus) | 0 | 0 | ® | |
| Other (e.g. Bus) | | | | |

| i i. rbui sewaye | 12. Assessment of Flood Kisk |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| * Please state how foul sewage is to be disposed of: | Is the site within an area at risk of flooding? (Refer to the |
| Mains sewer Cess pit | Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.) |
| Septic tank Other | Yes No |
| Package treatment plant | If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site. |
| Are you proposing to connect to the existing drainage system? Yes No | Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? |
| If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s): | Will the proposal increase the flood risk elsewhere? |
| plant(s)/ dra wing(s). | How will surface water be disposed of? |
| | Sustainable drainage system V Existing watercourse |
| | Soakaway Pond/lake |
| | Main sewer |
| 13. Biodiversity and Geological Conservation | 14. Existing Use |
| To assist in answering the following questions refer to the guidance | Please describe the current use of the site: |
| notes for further information on when there is a reasonable | MICHAIT SITION STOREY |
| ikelihood that any important biodiversity or geological conservation features may be present or nearby and whether | BUTIQIALOW |
| they are likely to be affected by your proposals. | |
| Having referred to the guidance notes, is there a reasonable ikelihood of the following being affected adversely or conserved | Is the site currently vacant? |
| and enhanced within the application site, or on land adjacent to or near the application site? | If Yes, please describe the last use of the site: |
| | |
| a) Protected and priority species: Yes, on the development site | |
| Yes, on land adjacent to or near the proposed development | |
| No | When did this use end (if known)? DD/MM/YYYY (data where known may be approximate) |
| o) Designated sites, important habitats or other biodiversity reatures: | (date where known may be approximate) |
| Yes, on the development site | Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application. |
| Yes, on land adjacent to or near the proposed development No | Land which is known to be contaminated? |
| c) Features of geological conservation importance: | Land where contamination is suspected for all or part of the site? Yes No |
| Yes, on the development site | A proposed use that would |
| Yes, on land adjacent to or near the proposed development No | be particularly vulnerable to the presence of contamination? Yes No |
| 15. Trees and Hedges | 16. Trade Effluent |
| Are there trees or hedges on the | Does the proposal involve the need to |
| oroposed development site? | dispose of trade effluents or waste? Yes V No |
| And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes | If Yes, please describe the nature, volume and means of disposal of trade effluents or waste |
| f Yes to either or both of the above, you <u>may</u> need to provide a full Free Survey, at the discretion of your local planning authority. If a | |
| Free Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning | |
| authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to | |
| design, demolition and construction - Recommendations'. | |

| | Propos | ed | Hous | ing | | | | | Existi | ng l | Hous | ing | | | |
|-----------------------------------------------|--------------|-------|----------|---------|--------------|-----------------|--------|------------------------------------|-------------------------------------|---------|----------|----------|--------------|-----------------|----------|
| Market | Not | 1 | Numb | | _ | | Total | Market Housing | Not known | 1 | _ | | | ooms | Tot |
| Housing | known | 1 | 2 | 3 | 4+ | Unknown | | Houses | KITOWIT | | 2 | 3 | 4+ | Unknown | 1 |
| Houses | | | - | | | | | Flats/maisonettes | | | | | - | - | - |
| Flats/maisonettes | + | | | | | | | Sheltered housing | | | | | - | | - |
| Sheltered housing | | | - | | | | | Bedsit/studios | | | - | | - | | - |
| Bedsit/studios | | | | | | | | Cluster flats | | | | | - | | - |
| Cluster flats | | | 1 | | | | | Other | | | | | - | | - |
| Other | | To | tale /s | ı, h, | C 1 0 | 1010- | | Other | | To | tals (| 1 h | 1516 | (+ e + f) = | - |
| Social, Affordable Number of Bedrooms | | | | | 0 11 055 111 | | | _ | _ | | | \vdash | | | |
| Social, Affordable or Intermediate Rent | Not | | _ | 1 | | | Total | Social, Affordable or Intermediate | Not known | | _ | 1 | 1 | drooms T | |
| | known | 1 | 2 | 3 | 4+ | Unknown | | Rent | - | 1 | 2 | 3 | 4+ | Unknown | 1 |
| Houses | | | - | | | | | Houses | | | - | | - | | - |
| Flats/maisonettes | | | | | | | | Flats/maisonettes | | | | | | | - |
| Sheltered housing | | | | | | | | Sheltered housing | | | - | | | | <u> </u> |
| Bedsit/studios | | | | | | | | Bedsit/studios | | | _ | | <u> </u> | | _ |
| Cluster flats | | | | | | | | Cluster flats | | | - | | - | | - |
| Other | | | | | | | | Other | | | | _ | | | |
| Totals $(a + b + c + d + e + f) =$ | | | | | (+ e + f) = | | | Totals $(a + b + c + d + e + f) =$ | | | | | | | |
| Affordable Home Ownership | Not known | 1 | Num 2 | oer of | Bedr 4+ | ooms Unknown | Total | Affordable Home Ownership | Not known | 1 | Num 2 | ber o | F Bedr 4+ | ooms Unknown | Tota |
| Houses | | • | - | 3 | 41 | OTIKITOWIT | | Houses | | | | - | 171 | OTIKITOWI | |
| Flats/maisonettes | | | | | | | | Flats/maisonettes | | | | | 1 | | |
| Sheltered housing | 1 | | 1 | | | | | Sheltered housing | | | | | | | |
| Bedsit/studios | | | | | | | | Bedsit/studios | | | | | | | |
| Cluster flats | | | | | | | | Cluster flats | | | | | | | |
| Other | | | 1 | | | | | Other | | | | | | | |
| | | To | tals (a | 1 + b + | - C + C | (+ e + f) = | | | | To | tals (a | a + b - | + C + C | 1+e+f)= | |
| | Not | | Numl | ber of | Bedr | ooms | Total | | terter Homes Not Number of Bedrooms | | | rooms | Tota | | |
| Starter Homes | known | 1 | 2 | 3 | 4+ | Unknown | | Starter Homes | known | 1 | 2 | 3 | 4+ | Unknown | |
| Houses | | | | | | | | Houses | | | | | | | |
| Flats/maisonettes | | | | | | | | Flats/maisonettes | | | | | | | |
| Bedsit/studios | | | | | | | | Bedsit/studios | | | | | | | |
| Other | | | | | | | | Other | | | | | | | |
| | | | To | otals | (a + b | + C + d) = | | | | | To | otals | (a + b | + c + d) = | |
| Self Build and | Not known | 1 | | _ | _ | ooms | Total | Self Build and Custom Build | Not known | 1 | Num 2 | _ | 1 | ooms Unknown | Tota |
| Custom Build Houses | | 1 | 2 | 3 | 4+ | Unknown | | Houses | | | - | 3 | 4+ | OFIKHOWI | |
| Flats/maisonettes | | | + | | - | | | Flats/maisonettes | | | | | | | |
| Bedsit/studios | | | +- | | - | | | Bedsit/studios | | - | | | 1 | | |
| Other | | | + | | | | | Other | | | | | | | |
| Other | | | To | tals | /a + b | + c + d) = | | Other | | | To | otals | (a + b | + C + d) = | |
| | | | - 10 | | | 5 . 4/ | | | | | | | | | |
| Total proposed res | idential | unit | ·s // | + R = | $C + \Gamma$ |) + E) = | \neg | Total existing | residenti | alum | its | (F + C | ; + H - | - l + J) = | _ |
| rotal proposed res | nucittal | utill | .s (A | TUT | UTL | , T L) - | | Liotal chisting | - STUGITUR | ar Will | 11.5 | () T U | | 113/- | |

17. kesidential units (including conversion)

| of use ops able area: cial and hal services | Not applicable | estion above plea Existing gross internal floorspace (square metres) | Gross internation be lost by | | | | |
|-----------------------------------------------|----------------|----------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------------|-------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|--|
| able area: | | (square metres) | use or de (square i | change of molition | Total gross internal floorspace proposed (including change o use)(square metres) | Net additional gross internal floorspace following developme (square metres) | |
| cial and | I | | | | | | |
| | | | | | | | |
| | | | | | | | |
| ts and cafes | | | | | | | |
| tablishments | ; | | | | | | |
| takeaways | | | | | | | |
| er than A2) | | | - | | | | |
| ch and | | | | | | | |
| dustrial | | | | | | | |
| industrial | | | | | | | |
| distribution | | | | | | | |
| d halls of | | | | | | | |
| ence institutions | | | | | | | |
| Non-residential | | | | | | | |
| institutions Assembly and leisure | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| tal | | | | | | | |
| | ialins | titutions and host | tels inlease add | ditionally ind | icate the loss or gain of | rooms | |
| Not | | ng rooms to be lo | st by change | Total rooms | s proposed (including | Net additional rooms | |
| applicable | | of use or demo | lition | cha | anges of use) | Met additional 100ills | |
| | | | | | - | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| ollowing info | | on regarding emp | | | Tot | of full times | |
| | | | Part- | time | | al full-time Juivalent | |
| | | | | | | | |
| ees | | | | | | | |
| ees /ees | | ing (e.g. 15:30) for | r each non-res | idential use p | proposed: | | |
| /ees | openi | | | | Sunday and | Not known | |
| ning the hours of | | to Friday | Saturday | | Darik Holludys | | |
| ning the hours of | | to Friday | Saturday | | | | |
| ning the hours of | | to Friday | Saturday | | | | |
| ee | | ng | ng e hours of opening (e.g. 15:30) for | ng e hours of opening (e.g. 15:30) for each non-res | ng e hours of opening (e.g. 15:30) for each non-residential use p | e hours of opening (e.g. 15:30) for each non-residential use proposed: | |

| 22. Industrial or Commercial Processes and Machinery | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------|-----------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------------------------------|--|--|
| Please describe the activities and processes to be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed or | cts includir include the | na | | | | | |
| Is the proposal a waste management develor If the answer is Yes, please complete the following the complete the compl | | Yes e: | V No | | | | |
| | 문 inclu 글 allo | uding engin owance for o | city of the void in eering surcharge cover or restoration I waste or litres if | and making no on material (or | Maximum annual operational throughput in tonnes (or litres if liquid waste) | | |
| Inert landfill | | | | | | | |
| Non-hazardous landfill | | | | | | | |
| Hazardous landfill | | | | 2 | | | |
| Energy from waste incineration | | | | | | | |
| Other incineration | | | | | | | |
| Landfill gas generation plant | | | | | | | |
| Pyrolysis/gasification | | | | | | | |
| Metal recycling site | | | | | | | |
| Transfer stations | n | | | | | | |
| Material recovery/recycling facilities (MRFs) | | | | | | | |
| Household civic amenity sites | | | | | | | |
| Open windrow composting | T T | | | | | | |
| In-vessel composting | | | | | | | |
| Anaerobic digestion | | | | | | | |
| Any combined mechanical, biological and/ or thermal treatment (MBT) | | | | | | | |
| Sewage treatment works | | | | | | | |
| Other treatment | | | | | | | |
| Recycling facilities construction, demolition and excavation waste | | | | | | | |
| Storage of waste | | | | | | | |
| Other waste management | | | | | | | |
| Other developments | | | | | | | |
| Please provide the maximum annual operati | onal throug | ghput of the | following waste | streams: | | | |
| Municipal | | | | | | | |
| Construction, demolition and e | | | | | | | |
| Commercial and Industr | ial | | | | | | |
| Hazardous If this is a landfill application you will need to planning authority should make clear what it | o provide fu | urther inform | nation before you | ur application can | be determined. Your waste | | |
| 23. Hazardous Substances | THO THE COL | THE TOOL BITTOO | 277113 11 OD3110. | | | | |
| Does the proposal involve the use or storage | of any of | | | _ | | | |
| the following materials in the quantities state | ed below? | Yes | ☐ No | Not applicat | ble | | |
| If Yes, please provide the amount of each sul | ostance tha | it is involved | l: | 1 | | | |
| Acrylonitrile (tonnes) | • | ne oxide (tor | | | Phosgene (tonnes) | | |
| Ammonia (tonnes) | Hydrogen | cyanide (tor | nnes) | Sul | ohur dioxide (tonnes) | | |
| Bromine (tonnes) | Liquid | oxygen (tor | nnes) | | Flour (tonnes) | | |
| Chlorine (tonnes) Lic | uid petrole | eum gas (tor | nnes) | Refined | white sugar (tonnes) | | |
| Other: | | | Other: | | | | |
| Amount (tonnes): | | | Amount (ton | nes): | | | |

24. Ownership Certificates and Agricultural Land Declaration

* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

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 2015 Certificate under Article 14 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 s 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:

CERTIFICATE OF OWNERSHIP - CERTIFICATE B
Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14
12 days before the date of this applicant or this applicant on the same owner's and/or agricultural tenant* of any part of the land or building to which this application relates.

"owner's 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 - Applicant:

Date (DD/MM/YYYY):

24. Ownership Certificates and Agricultural Land Declaration (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 certify/ The applicant certifies that:

Neither Certificate A or B can be issued for this application

All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, 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: Name of Owner / Agricultural Tenant Address **Date Notice Served** Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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 published in the following newspaper On the following date (which must not be earlier circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

| 25: Planning Application Requirements - Unecklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted. | ne information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| The original and 3 copies* of a completed and dated application form: | The correct fee: |
| The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an dentified scale and showing the direction of North: | The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details): The original and 3 copies* of the completed dated |
| The original and 3 copies* of other plans and drawings or nformation necessary to describe the subject of the application: | Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings): |
| 'National legislation specifies that the applicant must provide the o cotal of four copies), unless the application is submitted electronical PAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl | v post (for example, on a CD, DVD or USB memory stick) |
| 26. Declaration /we hereby apply for planning permission/consent as described in a nformation. I/we confirm that, to the best of my/our knowledge, an genuine opinions of the person(s) giving them. | this form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the |
| Signed - Applicant: | Date (DD/MM/YYYY): |
| | (date cannot be pre-application) |
| 27. Applicant Contact Details | 28. Agen |
| Telephone numbers | Telephone |
| Country code: National number: Country code: Mobile number (optional): C | Country co Country cc |
| <u>E</u> i | |
| = 2 ¹ | |
| Ca f: DL | the Is) |
| <u>C</u> | |
| Er — | |
| | |

Fee Calculation Summary

| Application Fee For: (Standalone fee calculation) | |
|---------------------------------------------------|---------|
| Application type: | |
| Exemptions | |
| No exemptions have been applied | |
| Fee Calculation | |
| £462 per new dwelling | £462.00 |
| Reductions | |
| No reductions have been applied | |
| Payment | |
| Payment Method: | |
| Total | |
| Amount due | £462.00 |
| | |