

For office use only Application No.		
Date received		
Fee paid £	Receipt No:	

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

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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

First name:

Last name:	HARMOOD	Last name:
Company (optional):		Company (optional):
Unit:	House number: House suffix:	Unit: House number: House suffix:
House name:	PARKWOOD VIEW	House name:
Address 1:	COPSTER GREEN	Address 1:
Address 2:	,	Address 2:
Address 3:		Address 3:
Town:		Town:
County:		County:
Country:		Country
Postcode:	BBI 9EN	Postcode:
	ption of Proposed Works	
Please desc	ribe the proposed works:	
R	EPLACEMENT BETACHED	GARAGE
		\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

3. Descrip	otion of Proposed Works (continued)	
Has the worl	k already started? Yes V No	
If Yes, please	state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the worl	k already been completed?	
If Yes, please	e state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Ad	Idress Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provi	de the full postal address of the application site.	Is a new or altered vehicle access
Unit:	House number: House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name:	PARKWOOD VIEW	proposed to or from the public highway? Yes No  Do the proposals require any diversions,
Address 1:	CAPSTER AREAN	extinguishments and/or creation of public rights of way? Yes V
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:		
County:		
Postcode (optional):	BBI 9EN	
authority ab If Yes, pleas you were gi application Please tick i		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:  Will any trees or hedges need to be removed or pruned in
	Date (DD MM YYYY): re-application submission) he pre-application advice received:	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.
existing ca	ng oposed works affect r parking arrangements? Yes No use 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

	Existing (where applicable)	Proposed	Not applicable	Don
Walls		STONE/RENAIR		
Roof		CONORGE TILES		
Windows			Z	
Doors		UPYC		
Boundary treatments (e.g. fences, walls)	•			
Vehicle access and hard-standing				
Lighting				
Others (please specify)			7	
re you supplying addit Yes, please state refere	ional information on submitted planences for the plan(s)/drawing(s)/design	(s)/drawing(s)/design and access statement? gn and access 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, 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 large hold interest with at least 7 years left to run. \*\* "acrievit" enant" in section 65(8) of the Act. Date (DD/MM/YYYY): Or signed - Agent: 2021 FICATE OF OWNERSHIP - CERTIFICATE B t Management Procedure) (England) Order 2010 Certificate under Article 3 licant has given the requisite notice to everyone else (as listed below) who, on the day owner\* and/or agricultural tenant\*\* of any part of the land or building to which this old interest with at least 7 years left to run. on 65(8) of the Town and Country Planning Act 1990 **Date Notice Served Address**

Or signed - Agent:

Signed - Applicant:

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 (concentration (concentration) (Enterprise to the Agricultural Land Declaration (Enterprise to the Agricultural Land Declaration) (Enterprise to the Agricultural Land	TIFICATE C ngland) Order 2010 Certificate s of the other owners* and/or ag nable to do so.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
The state of the s	Address		Date Notice Served
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		4	
	/		·
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):
<ul> <li>Certify/ The applicant certifies that:</li> <li>Certificate A cannot be issued for</li> <li>All reasonable steps have been ta date of this application, was the o have/ the applicant has been una</li> <li>"owner" is a person with a freehold interest</li> </ul>	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 ap	(21 days before the
Notice of the application has been publish (circulating in the area where the land is s	ned in the following newspaper iterated):	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:	Or signed - Agent:		Data (DD /MM 0000)
7	Or signed Agent.		Date (DD/MM/YYYY):
12. Planning Application Require Please read the following checklist to mak information required will result in your ap the Local Planning Authority has been sub	se sure you have sent all the information in plication being deemed invalid. It will not	support of your proposal. Failube considered valid until all info	re to submit all ormation 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 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:	Listed Building:	The original and 3 cop completed, dated Ow Certificate (A, B, C or D applicable) and Article Certificate (Agricultura	nership ) – as : 12

information. I/we confirm that, to ti genuine opinions of the person(s) of Signed - Applicant	m that, to the best of my/our knowledge, any		ccompanying plans/drawings and additional ue and accurate and any opinions given are the Date (DD/MM/YYYY):		
			ntact Details	12021	(date cannot be pre-application)
			ers ers		
			National number:		Extension number:
			Mobile number (o	ptional):	<u> </u>
			Fax number (option	onal):	
			otional):		
16. Site Visit  Can the site be seen from a public i	oad, public footpath, bridleway or	other public land	? Yes	No	
If the planning authority needs to rout a site visit, whom should they come a site visit.	ontact? (Please select only one)	Agent	Applicant		lifferent from the plicant's details)
If Other has been selected, please p Contact name:	rovide:	Telephone numi	ber:		