

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

Application for a Lawful Development Certificate for an Existing use or operation or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2010

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. Applic	ant Name and Address	2. Agent Name and Address				
Title:	MR+ MR First name: R	Title: MRS First name: J				
Last name:	HUBBARD	Last name: DOUGLAS				
Company (optional):		Company (optional): JUDITH DOUGLAS TOWN PLANNING LTD				
Unit:	House House suffix:	Unit: House number: House suffix:				
House name:	THE CROFT	House name:				
Address 1:	EAVES HALL LANE	Address 1: 8 SOUTH FIELD DRIVE				
Address 2:	WEST BRADFORD	Address 2: WEST BRADFORD				
Address 3:	CLITHEROE	Address 3: CUTHE ROE				
Town:		Town:				
County:	LANCS	County: LANCS				
Country:		Country:				
Postcode:	BB7 3JG	Postcode: BB7 4TU				

Please prov			ress of the app	lication site.		4. Pre-ap Has assistar authority al	nce or prior	advice been	sought f	from the lo	ocal WAVO				
Unit:		umber:		suffix:		J	·	•	a inform	lJ	Spr-Valence Co.				
House name:	THE CR	OFT				you were g	iven. (This w	vill help the a			ut the advice ith this				
Address 1:	EAVES H		application more efficiently).  Please tick if the full contact details are not												
Address 2:	WEST B	RADF	ORP			known, and	I then comp	lete as much	n as poss	ible:					
Address 3:	CUTHE	eoe	· · · · · · · · · · · · · · · · · · ·			Officer nan			******************************	,,,,,,,,,,,,,					
Town:						BEN TAYLOR Reference:									
County:	LANCS					3/2024/0386									
Postcode (optional):	ВВ7 3	JG				<u> </u>	Date (	DD/MM/YY)							
Description	of location or	a grid re	eference. s not known):				• •	n submissio on advice re	•	<u></u>					
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Description	);					1 1	_	SIDENTIA EMENT (	-						
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5. Lawful	l Developn	nent Ce	rtificate - Ir	nterest In Lan	nd										
Please state	the applicant	's interes	st in the land:												
Owner:	Yes [	] No		Lessee:	Yes	☐ No		Occupier	: []	Yes [	No				
If Yes to Le	essee or Occu	oler pleas	se give details	of the owner and	d state	e whether th	ey have bee	n informed			oplication: en informed				
Name					Ac	ddress			in w	riting of th	ne application  No				
If No to all	the above, pl	ease give	e name and ad	dress of anyone	you k	now who ha	1			· · · · · · · · · · · · · · · · · · ·					
Na	ame		Address	5	of th	e the nature neir interest f known)	have beer	ether they n informed application No	•	If No, ple explain wh					
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With respect (a) a memb (b) an elect	ed member	ority, I am (c) re (d) re	n: elated to a me elated to an ele	mber of staff ected member onship and role			Do any of th	ese stateme		y to you? No					

7. Description of Use, Building Works or Activity  Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):  An existing use:  Existing building works:  An existing use, building work or activity in breach of a condition:  Yes  No	8. Description of Existing Use, Building Works or Activity  What is the existing site use(s) for which the certificate of lawfulness is being sought? Please fully describe each use and state which part of the land the use relates to:  CONSTRUCTION OF OUTBUILDINGS AND USE AS INCIDENTIAL RESIDENTIAL ACCOMMODATION TO A CLASS C3 (DWELLINGHOUSE) AND CONSTRUCTION OF A CONCRETE YARD AND
Being a use, building works or activity which is still going on at the date of this application  If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to:  CLASS C3 DWELLINGHOUSE	USE AS RESIDENTIAL CURTILAGE
9. Grounds For Application For A Lawful Developmen	t Certificate
Please state under what grounds is the certificate sought (you must t	
The use began more than 10 years before the date of this applic	
The use, building works or activity in breach of condition began	
The use began within the last 10 years, as a result of a change	of use not requiring planning permission, and there has not been a
change of use requiring planning permission in the last 10 years  The building works (for instance, building or engineering works of this application.	) were substantially completed more than four years before the date
The use as a single dwelling house began more than four years began more than the four years began which we will be a four years began more than the four years begin which years began more than the four years began which years began with the four years began which years began with the four years began where the four years began where years began with the	• •
Other - please specify (this might include claims that the chang from planning permission granted under the Act or by the Gene If the certificate is sought on 'Other' grounds please give details:	e of use or building work was not development, or that it benefited ral Permitted Development Order).
If any liceble, places give the reference number of any evicting plans	ing permission levely development actificate or enforcement
If applicable, please give the reference number of any existing plann notice affecting the application site. Include its date and the number	er of any condition being breached:
Reference Number:  Condition Number:  Please state why a Lawful Development Certificate should be grante	Date (DD/MM/YYYY): (must be pre application submission)
PLEASE REFER TO PLANNING STATEMENT	
10. Information In Support Of A Lawful Development	Certificate
When was the use or activity begun, or the building works substantially completed:  21/09/2011	(date must be pre-application submission) (DD/MM/YYYY)
In the case of an existing use or activity in breach of conditions has the	· ·
If Yes, please provide details of the dates, duration and any disconting your application is based on the claim that a use or activity has interruption occurred:	nuance of the development which is the subject of this application. If been ongoing for a period of years, please state exactly when any
In the case of an existing use of land, has there been any material chaof use of the land since the start of the use for which a certificate is so If Yes please provide details?	ange ought? Yes

!	Propo	osed H	Housi	ng				Existing Housing					
		Numk	oer of E	Bedroo	ms	Total		Number of Bedrooms			Tota		
	1	2	3	4+	Unknown			1	2	3	4+	Unknown	
Vlarket Housing						****	Market Housing						
Houses						27	Houses	*************					.0
lats & Maisonettes						43	Flats & Maisonettes						
ive-Work Units						4	Live-Work Units		<u> </u>				
Cluster Flats						2	Cluster Flats						
Sheltered Housing						7	Sheltered Housing						
Bedsit/Studios						¥	Bedsit/Studios						
Jnknown				1		£3	Unknown						
Market Hou	sing To	otal (a	+ b + c	+ d + 6	e + f + g =		Market Hou	sing T	otal (a	+ b + c	+ d + 6	e + f + g = 0	
Social Rented Housing	1	2	3	4+	Unknown		Social Rented Housing	1	2	3	4+	Unknown	
louses				1	1	pd.	Houses						- 61
lats & Maisonettes				<u> </u>		ăn.	Flats & Maisonettes						
.ive-Work Units				<u> </u>			Live-Work Units						7
Cluster Flats					<u> </u>		Cluster Flats						
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Cluster Flats	***************************************		<b></b>	<del>                                     </del>			Cluster Flats				<del> </del>		
Sheltered Housing				-	<del> </del>		Sheltered Housing		<u> </u>	<b></b>			
Bedsit/Studios							Bedsit/Studios						
Jnknown				<del>                                     </del>	-		Unknown		ļ				
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Houses							Houses					<del> </del>	
Flats & Maisonettes			<b> </b>	1	-		Flats & Maisonettes			<b>†</b>		<u> </u>	
ive-Work Units			<del> </del>	<del>                                     </del>			Live-Work Units	L	<del>                                     </del>	<u> </u>			
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information required will result in your application bein the Local Planning Authority has been submitted.	ave sent all the ng deemed inv	information in support of your proposal. Failure to submalid. It will not be considered valid until all information returned the applicant and therefore sufficient and precise inform	equired by
The original and 3 copies of a completed dated application form:	₽ .	The original and 3 copies of such evidence verifying the information included in the application as you can provide:	团
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:	[ <del>]</del>	The correct fee: £578	
information. I/we confirm that, to the best of my/our knew genuine opinions of the person(s) giving them.  Signed - Applicant  Date (DD/MM/YYYY):  IA-ID-2024 (date cannot be pre-application warning: The amended section 194 of the 1990 Act provides that	on submission)	n this form and the accompanying plans/drawings and a facts stated are true and accurate and any opinions giver  Or signed - Agent  e to furnish false or misleading information or to withhold ity to revoke, at any time, a certificate they may have issue	are the
13. Applicant Contact Details		14. Agent Contact Details	
Telephone numbers		Telephone numbers	
Country code: National number:  Country code: Mobile number (optional):	Extension number:	Country code: National number:	Extension number:
Country code: Fax number (optional):			
Email address (optional):			
15. Site Visit  Can the site be seen from a public road, public footpatl  If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please selected)  If Other has been selected, please provide:  Contact name:	nt to carry	other public land? Yes No Agent Applicant Other (if difference agent/applicant) Telephone number:	ent from the nt's details)
Email address:			