



FOR THE
APPLICATION OF
**HOUSEHOLDER PLANNING
APPEAL FORM**

If you need this document in large print, in audio format or in Braille, please contact our helpline on 0303 444 5000. To help you fill in this form correctly please refer to the enclosed guidance leaflet "How to complete your householder planning appeal form".

WARNING: The appeal and essential supporting documents must reach the Inspectorate within the appeal period. If your appeal and essential supporting documents are not received in time we will not accept the appeal.

PLEASE PRINT CLEARLY IN CAPITALS USING BLACK INK

A. APPELLANT DETAILS

Name

Company/Group name (if applicable)

Address

 Postcode

Daytime phone Fax

I prefer to be contacted by Post Email*

*Email address

B. AGENT DETAILS (IF ANY) FOR THE APPEAL

Name

Company/Group name (if applicable)

Address

 Postcode

Your reference

Daytime phone Fax

I prefer to be contacted by Post Email*

*Email address

C. LOCAL PLANNING AUTHORITY (LPA) DETAILS

Name of the LPA

LPA's application reference number

Date of the application

Date of the LPA's decision notice

D. APPEAL SITE ADDRESS

See section D of the guidance leaflet.

Address **22 ST PETERS CLOSE CLAYTON LE DALE LANCASHIRE**
Postcode **B75 9HH**

Note: Failure to provide the full postcode may delay the processing of your appeal.

Please answer the questions below:

- 1 Is the appeal site within a Green Belt? Yes No
- 2 Could the Inspector see the relevant parts of the appeal site sufficiently to judge the proposal from public land? Yes No
- 3 Are there any health and safety issues at, or near, the site which the Inspector would need to take into account when visiting the site? If yes, please describe them on a separate sheet. Yes No

E. DESCRIPTION OF THE DEVELOPMENT

See section E of the guidance leaflet.

Has the description of the development changed from that on the application form? Yes No

PROPOSED LOUNGE KITCHEN AND BEDROOMS EXTENSION INCLUDING ROOM IN ROOF SPACE AND SIDE DORMER DETACHED GARAGE

Area of floor space of proposed development in square metres **100.00**

F. REASON FOR THE APPEAL

See section F of the guidance leaflet.

The reason for this appeal is that the LPA has (please tick which applies):

- 1 Refused planning permission
- 2 Refused permission to vary a condition(s).

G. GROUNDS OF APPEAL

See section G of the guidance leaflet to help you decide what to include in your appeal

The extensions to the property have previously been approved (Application 3/2012/0658) and almost completed. The side dormer is an addition to this previously approved application which has been refused. The grounds of appeal are that if the extended building was existing, the side dormer would be permitted development and does not harm the appearance of the host building or the visual amenity of the wider area.

Please continue on a separate sheet if necessary.

J. ESSENTIAL SUPPORTING DOCUMENTS

If we do not receive both your appeal documents by the end of the appeal period we will not accept your appeal.

You must send the documents listed below with your appeal form. Please tick the boxes to confirm the documents are enclosed.

- 1 A copy of the **planning application form** sent to the LPA.
- 2 A copy of the **LPA's decision notice**.

K. OTHER APPEALS

If you have sent other appeals for this or nearby sites to us and these have not been decided, please give details and our reference numbers.


L. CHECK SIGN AND DATE

Please tick the boxes to confirm that the following actions have been carried out

- 1 I have completed all sections of the form and the details of the ownership (sections I, parts one and two) are correct to the best of my knowledge.
- 2 I have enclosed **both** the essential supporting documents listed in section J.
- 3 I have enclosed my grounds of appeal (if not given in section H).
- 4 I have sent a copy of this appeal form and relevant documents to the LPA (if you do not we will not normally accept your appeal).
- 5 I have signed and dated the form (unsigned forms will be returned to you).

Signature *D Holt* Date 29.5.16

Name (in capitals) D HOLT On behalf of (if applicable) CHESTERTON

 The gathering and subsequent processing of the personal data supplied by you in this form, is in accordance with the terms of our registration under the Data Protection Act 1998. Further information about our Data Protection policy can be found in the guidance leaflet.

M. NOW SEND

Send **THIS** form (not a photocopy of it) to us at:

Initial Appeals
PO Box 3035
Temple Quay House
2 The Square
Temple Quay
BRISTOL
BS1 9FG

Helpline: 0303 444 5000

Send a copy to the LPA

You may wish to keep a copy of the completed form for your records

When we receive your appeal form, we will write to you letting you know if your appeal is valid, who is dealing with it and what happens next.