

Householder Application for Planning Permission for works or extension to a dwelling Town and Country Planning Act 1990

Privacy 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. Any 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.

Ipon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to Inform you of their bligations in regards to the processing of your application. Please refer to their 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:



Rutland County Council Planning Support Section Catmose, Oakham, Rutland LE15 6HP

Tel: 01572 722577 | Fax: 01572 758373 | Email:planning@rutland.gov.uk

ublication on Local Planning Authority websites

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

ease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require sy further clarification, please contact the 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 plication.

. Applicant Name and Address					
itle:	MR First name: RICHARD				
ast name:	DILWORTH				
ompany optional):					
nit:	House number: 15 House suffix:				
ouse ame:					
ddress 1:	MELTON RORD				
ddress 2:	LANGHAM				
ddress 3:					
own:	OAKHAM				
ounty:	RUTLAND				
ountry:	ENCLAND				
stcode:	LEIS 7JN				

Z. Agent Nan	ne and Address	
Title:	First name:	
Last name:		
Company (optional):		
Unit:	House number:	House suffix:
House name;		
Address 1:		
Address 2:		
Address 3:		
Town:		
County:		
Country:		
Postcode:		

Please describe the proposed works:	
Decor one imple	
KEPLACE THREE WIN	DOWS WITH UPVC SASH
ONES. PRESENT WI	NDOWS ARE WOODEN AND
(NEED CHANGING AS T	HEY ARE ROTTEN AND DO
NOT STOP TRAFFIC N	JOISE
Has the work already started? Yes No	
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
-las the work already been completed?	
f Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
Site Address Details Please provide the full postal address of the application site.	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Juit: House number: \(\frac{15}{5} \) House suffix:	Is a new or altered vehicle access proposed to or from the public highway? Yes No
douse name:	is a new or aftered pedestrian access proposed to or from the public highway? Yes No
Address 1: MELTON ROAD	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2: LANG HAM	rights of way? Yes No If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
ONI: CAKHAM	
county: RUTLAND	
ostcode LEIS JIN	
. Pre-application Advice	7. Trees and Hedges
as assistance or prior advice been sought from the local uthority about this application? Yes, please complete the following information about the advice ou were given. (This will help the authority to deal with this oplication more efficiently). ease tick if the full contact details are not nown, and then complete as much possible: Officer name:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? Yes No If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Date (DD MM YYYY): nust be pre-application submission) etails of the pre-application advice received:	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.

Will the proposed wor	ks affect existing car parking arrangements?	Yes 🔀 N	No.		
If Yes, please describe	Ç				
*					
means related, by birth	loyee / Member liple of decision-making that the process is open ar nor otherwise, closely enough that a fair minded ar as bias on the part of the decision-maker in the loca	nd informed ob	server, having considered the facts,	elated would	to"
Do any of the following	g statements apply to you and/or agent? Yes	⊠ No	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	n :	
If Yes, please provide of	details of their name, role and how you are related	to them.			
10. Materials					
f applicable, please sta	te what materials are to be used externally. Includ	e type, colour a T	nd name for each material:		
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls				☒	
Roof				X	
Windows	WHITE WOODEN SASH	WAIT	e C Siash		
Doors				×	
3oundary treatments (e.g. fences, walls)				\boxtimes	

if applicable, please s	tate what materials are to be used externally. Include type, colour and name for each material:		
Vehicle access and hard-standing			
Lighting		X	
Others (please specify)		\boxtimes	
	ditional information on submitted plan(s)/drawing(s)/design and access statement? Yes erences for the plan(s)/drawing(s)/design and access statement:		No

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 | 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 leasehold interest with at least 7 years left to run.

Signed - Applicant:

** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Ap Or signed - Agent: Date (DD/MM/YYYY): 20-11-2020 **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** elopment Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) 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 or building to which this application relates. "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 Name of Owner / Agricultural Tenant Address **Date Notice Served**

Or signed - Agent:

Date (DD/MM/YYYY):

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: Date (DD/MM/YYYY): Or signed - Agent: **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 se stone taken were:

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Or signed - Agent:	Date (DD/MM/YYYY)
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CERTIFICATE OF OWNERSHIP - CERTIFICATE A

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 Date (DD/MM/YYYY):

 20-11-2020

ERTIFICATE OF OWNERSHIP - CERTIFICATE B ment Management Procedure) (England) Order 2015 Certificate under Article 14

rtify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day lays before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this lication relates.

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Date (DD/MM/YYYY):

20 - 11 - 20 20

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		20-11-2020

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information req		lication being deemed inv			of your proposal. Failure to submi dered valid until all information re	
The original and		The original and 3 design and access			The correct fee:	
The original and dentifies the lar elates drawn to and showing the The original and and drawings or	dated application form: 1 3 copies* of a plan which 1 3 copies* of a plan which 2 an identified scale 2 direction of North: 1 3 copies* of other plans 3 information necessary to 5 ject of the application:	proposed works fal	ll within a or		The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings)	;
_PAs may also a	ation specifies that the app ies), unless the application ccept supporting documen our LPA's website for inforn	ts in electronic format by	post (for example	, on a (of the form and supporting docum at a smaller number of copies is red CD, DVD or USB memory stick). scuss these options.	ents (a juired.
13. Declarati	ion					
/we hereby app nformation. I/w jenuine opinion	ly for planning permission/ e confirm that, to the best on s of the person(s) giving th	consent as described in th of my/our knowledge, any em.	nis form and the a facts stated are to	ccomp rue and	panying plans/drawings and addition diaccurate and any opinions given	onal are the
Signed - A		Or signed - Agent:			Date (DD/MM/YYYY):	
					20-11-2020 (dat pre-	e cannot be application
14. Applican	t Contact Details		15. Agent C	onta	ct Details	
Telephone num	bers		Telephone nun	obers		
		Extension				Extension
Country code:	National number:	number:	Country code:	Nati	onal number:	number:
-				I L	1	
Country code.	Mobile number (optional)	-	Country code:	Mob	oile number (optional):	
	L			<u></u> ا ا		
Country code:	Fax number (optional):		Country code:	Fax	number (optional):	
	<u> </u>		Email address (ontion	nall:	
			Lindii addi ess (option	idiy.	
an the site be s	een from a public road, pul	olic footpath, bridleway or	other public land	17	Yes No	
f the planning a out a site visit, w	uthority needs to make an hom should they contact?	appointment to carry (Please select only one)	Agent	X	Applicant Other (if differe agent/applicant	
	selected, please provide:		Talanhana	o 1 200000000		
Contact name:			Telephone num	iber:		
Email address:						