



Householder Application for Planning Permission for works or extension to a dwelling

Council	Mid Suffolk District Council
Applicant Name and Address	
Title	Mr
First name	K
Last name	Lankester
Company	
Property name/number	Honeysuckle Cottage
Address line 1	The Green
Address line 2	
Town/Village	Asbocking
County	Suffolk
Country	
Postcode	IP6 9JZ
Is an agent being used	Yes
Do you believe you are exempt from the application fee?	No, standard fees will apply
Planning application reference number for resubmission	
Agent Name and Address	
Title	Mr
First name	P
Last name	Laflin
Company	Build to Plans
Property name/number	19
Address line 1	Aldham Gardens
Address line 2	

Town/Village	Stowmarket
County	Suffolk
Country	
Postcode	IP14 2PS
Description of Proposed Works	
Please describe the proposed works	Installation of Two Dormer Windows to the Roof to the Front of Existing Dwelling (previously approved under Planning Permission 0853/93 but not carried out).
Has the work already started?	No
If Yes, please state when the work was started	
Has the work already been completed?	No
If Yes, please state when the work was completed	
Site Address Details	
Property name/number	Honeysuckle Cottage
Address line 1	The Green
Address line 2	
Town/Village	Asbocking
County	Suffolk
Postcode	IP6 9JZ
Pedestrian and Vehicle Access, Roads and Rights of Way	
Is a new or altered vehicle access proposed to or from the public highway?	No
Is a new or altered pedestrian access proposed to or from the public highway	No
Do the proposals require any diversions, extinguishments and/or creation of public rights of way?	No
If Yes to any of questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s)	
Pre-application Advice	

Has assistance or prior advice been sought from the local authority about this application?	No
Officer name	
Pre-application reference	
Date	
Details of pre-application advice received	
Trees and Hedges	
Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development?	No
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 order to carry out your proposal?	No
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)/drawings(s) and indicate the scale.	
Parking	
Will the proposed works affect existing car parking arrangements	No
If Yes, please describe	
Authority Employee / Member	
Do any of the listed statements apply to you and/or agent?	No
If Yes, please provide details of their name, role and how you are related to them.	
Materials	
Walls	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Hardie-plank cladding colour similar to external walls of existing dwelling.

Roof	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Re-use existing roof tiles and make up quantities to match
Windows	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Upvc to match those on the existing dwelling
Doors	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Boundary treatments (e.g. fences, walls)	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Vehicle access and hard-standing	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Lighting	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Others (please specify)	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?	Yes
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If Yes, please state references for the plan(s)/drawing(s)/design and access statement	Drawing 2021.04
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Ownership Certificates and Agricultural Land Declaration

Please select an ownership certificate and agricultural land declaration statement that applies to you	Certificate A
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CERTIFICATE OF OWNERSHIP - CERTIFICATE A

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

Signed Applicant	
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Or signed - Agent	
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Date	
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Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Signed Applicant	
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Or signed - Agent	
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Date	
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Applicant Contact Details

Telephone number	
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Extension number	
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Mobile telephone number	
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Fax number	
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Email address	
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Agent Contact Details

Telephone number	
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Extension number	
Mobile telephone number	
Fax number	
Email address	
Site Visit	
Can the site be seen from a public road, public footpath, bridleway or other public land?	Yes
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Applicant
Contact name	
Telephone number	
Email address	
Payment	
Are you the applicant or are you an agent working on behalf of the applicant?	
Who will pay for this application?	
Email address (this is the address the payment receipt will be sent to)	
Payment Total	
Payment Receipt Number	
Date & Time	