

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

'rivacy 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:



RECEIVED BY 2 1 JAN 2021 ADMIN SERVICES

Growth and Regeneration Business Unit Castle House, Great North Road, Newark, Nottinghamshire NG24 1BY

> Telephone: 01636 650000 Email: customerservices@nsdc.info

> > House suffix:

Website: www.newark-sherwooddc.gov.uk/planning/

'ublication on Local Planning Authority websites

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

lease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require ny 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 pplication.

Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: First name: 3
Last name: TONGUE	Last name: LUFF
Company (optional):	Company (optional): NEEDHAMS WINDOWS
Unit: House number: 3 House suffix:	Unit: House number: House suffix
House name:	House name:
Address 1: BLACKBIRD PLACE	Address 1: GREAT CENTRAL ROAD
Address 2: RAINWORTH	Address 2:
Address 3:	Address 3:
TOWN: MANSFIELD	Town: LOUGHBOROUGH
County: NOTTINGHAMSHIRE	County:
Country:	Country:
Postcode: NG210WR	Postcode: LEII IRW

3. Description of Proposed Works Rlease describe the proposed works:	
ERECT A	CONSERVATORY.
Has the work already started? Yes f Yes, please state when the work was started (DD/MM/Y Has the work already been completed? Yes f Yes, please state when the work was completed (DD/M	No (date must be pre-application submission
4. Site Address Details Please provide the full postal address of the application s Unit: House number: 3 House suffix: House name: Address 1: BLACKBIRD PLACE Address 2: RAINWORTH Address 3: Town: MANSFIELD County: NGTINGHAMSHIRE Postcode (optional): NG21 OWR	5. Pedestrian and Vehicle Access, Roads and Rights of Way
6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes f Yes, please complete the following information about the you were given. (This will help the authority to deal with the application more efficiently). Please tick if the full contact details are not known, and then complete as much possible: Officer name: Date (DD MM YYYY): "must be pre-application submission) Details of the pre-application advice received:	property or on adjoining properties which are within falling distance of your proposed development? Yes No Yes

Will the proposed work	ks affect existing car parking arra	ngements? Yes	™ No		
If Yes, please describe:			/		
means related, by birth	ple of decision-making that the or otherwise, closely enough the	at a fair minded and inform	arent. For the purposes of this quested observer, having considered the	stion, "related e facts, would	to"
conclude that there was bias on the part of the decision-maker in the local planning authority. Do any of the following statements apply to you and/or agent? Yes No With respect to the authority, I at (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member			staff		
íf Yes, please provide d	letails of their name, role and ho	w you are related to them.			
10. Materials					
r applicable, please sta	te what materials are to be used	externally. Include type, co	olour and name for each material:	9	T
	Existing (where applicable)	Propos	sed	Not applicable	Don't Know
Walls	NIA		STOCK WELBECK RED	,c	
Roof	NA		CLEAR GLASS ROOF.		
Windows	NA		WHITE PVC4		
Doors	NA		WHITE PVC4		
Boundary treatments (e.g. fences, walls)	NA		N/A		

10. Waterials If applicable, please st	ate what materials are to be used exte	ernally. Includ	le type, colour and	name for each materi	al:	(m))
Vehicle access and hard-standing	NA		NA				
Lighting	N/A.	STANDARD INTERNA DOMESTIC LIGHTIN			A(UG		
Others (please specify)	NIA		Ν	(A			
	litional information on submitted plar rences for the plan(s)/drawing(s)/desi			s statement?	Yes	Æ	ρNο
0	0						
Q	0	C		0	C		
						* -87"	