



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

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information 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).

Please 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 subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Planning Services

West Suffolk House, Western Way, Bury St Edmunds, Suffolk, IP33 3YU West Suffolk, aoy.uk/planning www.westsuffolk.gov.uk/planning

Email: customer.services@westsuffolk.gov.uk

Telephone: 01284 763233



Publication on Local Planning Authority websites

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

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

Applicant Name and Address	2. Agent Name and Address
Title: MP First name: +	Title: First name:
Last name: THORN TON	Last name: DEAN JAY PEARCE ARCHITECTURAL DESIGN
Company (optional): O A UERH	Company (optional): PLANA ING CTD.
Unit: House / House suffix:	Unit: 2/3 House / House suffix:
House name:	House name: MILESTONE
Address 1:	Address 1: HALL STREET
Address 2:	Address 2: LONG MELFORD
Address 3:	Address 3: SUFFOX
Town:	Town: COO 9HZ
County:	County:
Country:	Country:
Postcode:	Postcode:
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3. Description of Proposed Works		
Please describe the proposed works:		
SINGUE-SCOREN (REAR) ALTERATIONS.	FA-FENSION &	
ALTERATIONS.		
Has the work already started? Yes \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
If Yes, please state when the work was started (DD/MM/YYYY):		
	(date must be pre-application submission)	
Has the work already been completed?		
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)	
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way	
Please provide the full postal address of the application site. House House	Is a new or altered vehicle access proposed to or from the public highway? Yes No	
Unit: number: suffix:	Is a new or altered pedestrian access	
House name: PRENTICE HOUSE	proposed to or from the public highway? Yes No Do the proposals require any diversions,	
Address 1: HIGH STREET	extinguishments and/or creation of public rights of way?	
Address 2: CAVENDISH	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/	
Address 3: SUFFOUR	drawing(s):	
Town: CO \$ 8AX		
County:		
Postcode (optional):		
6. Pre-application Advice	7. Trees and Hedges	
Has assistance or prior advice been sought from the local authority about this application?	Are there any trees or hedges on your own property or on adjoining properties which	
If Yes, please complete the following information about the advice	are within falling distance of your proposed development? Yes No	
you were given. (This will help the authority to deal with this application more efficiently).	If Yes, please mark their position on a scaled	
Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:	
known, and then complete as much possible: Officer name:	I N/A	
Reference:		
	Will any trees or hedges need	
Date (DD MM YYYY):	to be removed or pruned in order to carry out your proposal? Yes No	
(must be pre-application submission)	If Yes, please show on your plans which trees by giving them	
Details of the pre-application advice received: numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.		
I diawing(s) and maleate the scale.		
	N/A	
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8. Parking Will the proposed works affect existing car parking arrangements? Yes No					
If Yes, please describe:					
means related, by birth	oyee / Member ple of decision-making that the process is open an or otherwise, closely enough that a fair minded an s bias on the part of the decision-maker in the loca	d informed obs	erver, having considered the facts,		:O"
Do any of the following	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	Ē	
If Yes, please provide d	etails of their name, role and how you are related t	o them.			
NA					
10. Materials If applicable, please stat	te what materials are to be used externally. Include	e type, colour ar	nd name for each material:		
	Existing (where applicable)	Proposed (+0 M/	HOH EXTG)	Not applicable	Don't Know
	RED FRUNG BUK	RED +	ACW OF BWK		
Walls	+ PATINITED HARDIPLANK	+ PMIX	HED PENDER		
	NATURAL SLATE F ASPHALT FLAT ROOFS	DARK	arty s.P.M		
Roof	ASPHANT FIRST ROOFS				
	PATIALTED (WHITE)	DI-F	to		
Windows	softwood.				
	PATINITED SOFTWOOD) DI-F-1	O		
Doors					
	PENCES /WALLS	SHA	FFECTED BY		
Boundary treatments (e.g. fences, walls)		PROF	OSALS.		

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10. Materials	ate what materials are to be used exte	ernally. Include type, colour and name for each material:		
Vehicle access and hard-standing	SHALGUE	SHAUE		
Lighting	NA	N/A		
Others (please specify)	NA	NA		
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? If Yes, please state references for the plan(s)/drawing(s)/design and access statement: If Yes No				No

11. Ownership Certificates and Agricultural Land Declaration 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 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** 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. tion 65(8) of the Act. ** "agricultural holding" has the meaning given by reference Signed - Applicant: Date (DD/MM/YYYY): 07.01.2 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Prosedure) (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 **Date Notice Served** Name of Owner / Agricultural Tenant Address Signed - Applicant: Date (DD/MM/YYYY): Or signed - Agent:

Town and Country Planning (Development of the Applicant certifies that: Neither Certificate A or B can be issued the land or building, or of a part of it "owner" is a person with a freehold interest of the steps taken were: The steps taken were:	CERTIFICATE OF OWNERSHIP - CER opment Management Procedure) (En	TIFICATE C ngland) Order 2015 Certificate	
Name of Owner / Agricultural Tenant	Name of Owner / Agricultural Tenant Address Date Notice Se		Date Notice Served
Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): On the following date (which must not be earlier than 21 days before the date of the application):			
Signed - Applicant: Or signed - Agent:		Date (DD/MM/YYYY):	
Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I 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 Tyears 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:			
Notice of the application has been published (circulating in the area where the land is situ	d in the following newspaper ated):	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant.	Or signed - Agent:		Date (DD/MM/YYYY):

12. Planning Application Requirements - Checklist	Information in compart of vocument and a failure to submit all		
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed invited the Local Planning Authority (LPA) has been submitted.	valid. It will not be considered valid until all information required by		
The original and access of a completed and dated application form: The original and access of a design and a design an	statement if		
The original and a copies* of a plan which identifies the land to which the application relates drawn to an Identified scale and showing the direction of North: The original and a copies* of other plans and drawings or information necessary to describe the subject of the application:	or completed_dated Ownership		
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.			
13. Declaration			
I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the		
Signed - Applicant:	Date (DD/MM/YYYY):		
	/data sassed ha		
	o7.01.21 (date cannot be pre-application)		
14 4 1 1 1 1 1 1 1 1 1 1	(45 0 10 1 10 11		
14. Applicant Contact Details	15. Agent Contact Details		
Telephone numbers C/o A-CIEVIT Extension	Telephone numbers Extension		
Country code: National number: number:	Country code: National number: number:		
	01787 378797		
Country code: Mobile number (optional):	Country code: Mobile number (optional):		
Country code: Fax number (optional):	Country code: Fax number (optional):		
Email address (optional):	Email address (optional):		
	[dean pearce wlive-co.UK]		
16. Site Visit			
Can the site be seen from a public road, public footpath, bridleway or	other public land? Yes		
If the planning outhority people to make an appointment to corru			
out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)		
If Other has been selected, please provide:			
Contact name:	Telephone number:		
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Email address:

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