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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:



Babergh District Council
Endeavour House, 8 Russell Road,
Ipswich, IP1 2BX
Tel: 0300 1234000 option 5

Making the area a better place to live and work for everyone

Email: planning@baberghmidsuffolk.gov.uk

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House suffix:

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.

1. Applicant Name and Address	2. Agent Name and Address		
Title: MRS First name: GLORIA	Title: MY First name: _		
Last name: Powell	Last name: BENSCEY-BYHAN		
Company (optional):	Company (optional): ARCHITECTURE		
Unit: House number: 118 House suffix:	Unit: House number: 22		
House name:	House name:		
Address 1: CLOPTON GARPENS	Address 1: HIGH STREET		
Address 2:	Address 2:		
Address 3: HADLEIGH	Address 3: HAVLAGH		
Town: IPSWICH	Town: IPSWICH		
County: SOFFOLK	County: SUFFAIC		
Country: UK	Country: UK		
Postcode: IP7 5JQ	Postcode: IPT StP		

3. Description of Proposed Works	
Please describe the proposed works:	
DEMOLITION OF EXISTING (HRACE, REBURD MEN
GARAGE IN SAME PLACE	,
FRANT CARAGE EXTENSION	
NEW PITCHED ROOF TO	REPLACE FLAT ROOF.
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)
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.	Is a new or altered vehicle access
Unit: House number: 18 House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name:	proposed to or from the public highway? Yes No
Address 1: CLOPTON GARNENS	Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes You
Address 2:	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:	drawing(s):
Town: HADLEIGH, IPSWICH	
County: SUFFOLK	
Postcode (optional): IP7 550	
6. Pre-application Advice	7. Trees and Hedges
Has assistance or prior advice been sought from the local	Are there any trees or hedges on your own
authority about this application?	property or on adjoining properties which are within falling distance of your proposed
If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this	development? Yes
application more efficiently).	If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Please tick if the full contact details are not known, and then complete as much possible:	
Officer name:	
Reference:	
	Will any trees or hedges need to be removed or pruned in
Date (DD MM YYYY):	order to carry out your proposal? Yes You
(must be pre-application submission) Details of the pre-application advice received:	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.

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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 and or otherwise, closely enough that a fair minded and s bias on the part of the decision-maker in the local	d informed obs	server, having considered the facts,		o"
Do any of the following	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				
If Yes, please provide details of their name, role and how you are related to them.					
10. Materials If applicable, please stat	te what materials are to be used externally. Include	e type, colour a	nd name for each material:		
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls	BRICIC	BR	LCC		
Roof	FELT FLAT ROOF	Tilt	S, PITCHEN)		
Windows	NH	,	JA		
Doors	UPUC/ALUMMUL	UA	JC/Acerum		
Boundary treatments (e.g. fences, walls)					

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10. Materials				
If applicable, please state what materials are to be used externally. Include type, colour and name for each material:				
Vehicle access and hard-standing	CONCILETE	CONCRETE		
Lighting				
Others (please specify)				
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No				
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:				
SITE LOCATION PWW, BLOCK PWW 2020/39/0500				
GARACE EXTENSION, EXISTING PROPOSED 2020/398/0101 A. ELEVATIONS				

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 ** "agricultural holding" has the meaning given by reference to " in section 65(8) of the Act. Date (DD/MM/YYYY): Signed - Applicant: 19.02.21 CERTIFICATE O Town and Country Planning (Development Manag er 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 Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant:

Town and Country Planning (Devilor I certify/ The applicant certifies that: Neither Certificate A or B can be in the land or building, or of a part of the land or building, or of a part of the land or building.	ssued for this application	IFICATE C gland) Order 2015 Certificate under Article 14 of the other owners* and/or agricultural tenants** of able to do so. If to run.
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Notice of the application has been publi (circulating in the area where the land is	shed in the following newspaper 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/N		Date (DD/MM/YYYY):
 Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the chave/ the applicant has been una * "owner" is a person with a freehold interest 	this application ken to find out the names and addresses o wner* and/or agricultural tenant** of any	gland) Order 2015 Certificate under Article 14 of everyone else who, on the day 21 days before the part of the land to which this application relates, but I
Notice of the application has been publish (circulating in the area where the land is s	hed in the following newspaper ituated):	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):

12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.			
The original and 3 copies* of a completed and dated application form: The original and 3 copies of a design and access some proposed works fall.	tatement if		
The original and 3 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 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	r 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, and genuine opinions of the person(s) giving them.	is 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):		
	18-02-202 (date cannot be pre-application)		
14. Applicant Contact Details	Details		
Telephone numbers	Telephone numbers		
Country code: National number: Extension number:	Country code: National number: Extension number:		
Country code: Mobile number (optional):	country code. Wobile number (optional).		
Country code: Fax number (optional): \	Country code: Fax number (optional):		
Email address (optional):	Emailaddress (optional):		
16. Site Visit			
Can the site be seen from a public road, public footpath, bridleway or			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Applicant Other (if different from the agent/applicant's details)		
If Other has been selected, please provide: VContact name:	Telephone number:		
CONTRACT HAIRIE.	1010priorio nambor.		