



Mid Suffolk District Council Planning Services
Endeavour House, 8 Russell Road,
Ipswich, IP1 2BX
Tel: 0300 1234000 option 5
Email: planning@baberghmidsuffolk.gov.uk
www.midsuffolk.gov.uk

An application to determine if prior approval is required for a proposed:

Larger home extension.

The Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended) -
Schedule 2, Part 1, Class A

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

1. Site Address

Number	<input type="text" value="35"/>
Suffix	<input type="text"/>
Property name	<input type="text"/>
Address line 1	<input type="text" value="Fraser Road"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Town/city	<input type="text" value="Bramford"/>
Postcode	<input type="text" value="IP8 4HS"/>

Description of site location must be completed if postcode is not known:

Easting (x)	<input type="text" value="612494"/>
Northing (y)	<input type="text" value="247012"/>

Description

2. Applicant Details

Title	<input type="text" value="Mr"/>
First name	<input type="text" value="Matthew"/>
Surname	<input type="text" value="Bailey"/>
Company name	<input type="text"/>
Address line 1	<input type="text" value="35, Fraser Road"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>

2. Applicant Details

Town/city	<input type="text" value="Bramford"/>
Country	<input type="text"/>
Postcode	<input type="text" value="IP8 4HS"/>
Are you an agent acting on behalf of the applicant?	
Primary number	<input type="text"/>
Secondary number	<input type="text"/>
Fax number	<input type="text"/>
Email address	<input type="text"/>

☒ Yes ☐ No

3. Agent Details

Title	<input type="text" value="Mrs"/>
First name	<input type="text" value="Holly"/>
Surname	<input type="text" value="Bailey"/>
Company name	<input type="text" value="Holly Bailey Designs Ltd."/>
Address line 1	<input type="text" value="48 Julia Gate"/>
Address line 2	<input type="text"/>
Address line 3	<input type="text"/>
Town/city	<input type="text" value="Stevenage"/>
Country	<input type="text" value="Herts"/>
Postcode	<input type="text" value="SG2 7QT"/>
Primary number	<input type="text"/>
Secondary number	<input type="text"/>
Fax number	<input type="text"/>
Email	<input type="text"/>

4. Eligibility

Please indicate the type of dwellinghouse you are proposing to extend:

- ☐ Detached
☒ Other

Will the extension be:

- a single storey;
- no more than 4 metres in height (measured externally from the natural ground level); and
- extend beyond the rear wall of the original dwellinghouse (measured externally) by over 3 but no more than 6 metres.

☒ Yes ☐ No

Note that where the proposed extension will be joined to an existing extension, the measurement must represent the total enlargement (i.e. both the existing and proposed extensions) to the original dwellinghouse.

4. Eligibility

Is the dwellinghouse to be extended within any of the following: ☐ Yes ☒ No

- a conservation area;
- an area of outstanding natural beauty;
- an area specified by the Secretary of State for the purposes of enhancement and protection of the natural beauty and amenity of the countryside;
- the Broads;
- a National Park;
- a World Heritage Site;
- a site of special scientific interest;

5. Description of Proposed Works

Please describe the proposed single-storey rear extension:

Single storey rear extension to existing garage.

Measurements

Please provide the measurements as detailed below.
Where the proposed extension will be joined to an existing extension, the measurements provided must be in respect to the total enlargement (i.e. both the existing and proposed extensions) to the original dwellinghouse.

How far will the extension extend beyond the rear wall of the original dwellinghouse (in metres, measured externally)	5.10
What will be the maximum height of the extension (in metres, measured externally from the natural ground level)	2.43
What will be the height at the eaves of the extension (in metres, measured externally from the natural ground level)	2.43

6. Adjoining premises

Please provide the full addresses of all adjoining premises to the house you are proposing to extend. This should include any premises to the side/front/rear, even if they are not physically 'attached'

1	
Number	
Suffix	
House Name	34
Address line 1	Frazer Road
Address line 2	Bramford
Town/city	Ipswich
Postcode	IP8 4HS

2	
Number	
Suffix	
House Name	36
Address line 1	Frazer Road
Address line 2	Bramford
Town/city	Ipswich
Postcode	IP8 4HS

6. Adjoining premises

3	
Number	4
Suffix	
House Name	
Address line 1	Acton Gardens
Address line 2	Bramford
Town/city	Ipswich
Postcode	IP8 4HT

4	
Number	5
Suffix	
House Name	
Address line 1	Acton Gardens
Address line 2	Bramford
Town/city	Ipswich
Postcode	IP8 4HT

7. Declaration

I/we hereby apply for prior approval 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. ☒

Date (cannot be pre-application)	21/03/2021
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