## Oxford Planning Control and Conservation St Aldate's Chambers, 109-113 St Aldate's Oxford, OX1 1DS

Tel:

01865 249811

Email: planning@oxford.gov.uk



Application for a Lawful Development Certificate for an Existing use or operation or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2010

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## 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.

Please complete using block capitals and black ink.

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

| 1. Applica             | ant Name and Address          | 2. Agent Name and Address            |  |  |  |  |  |
|------------------------|-------------------------------|--------------------------------------|--|--|--|--|--|
| Title:                 | MR First name: M              | Title: First name: 111               |  |  |  |  |  |
| Last name:             | FARUR                         | Last name: DRISCOLL                  |  |  |  |  |  |
| Company<br>(optional): |                               | Company (optional):                  |  |  |  |  |  |
| Unit:                  | House number: / House suffix: | Unit: House number: 18 House suffix: |  |  |  |  |  |
| House<br>name:         |                               | House name:                          |  |  |  |  |  |
| Address 1:             | WMITSON PLACE                 | Address 1: DEARLONE CLOSE            |  |  |  |  |  |
| Address 2:             |                               | Address 2:                           |  |  |  |  |  |
| Address 3:             |                               | Address 3:                           |  |  |  |  |  |
| Town:                  | OXFORD                        | Town: ABINGDON                       |  |  |  |  |  |
| County:                |                               | County:                              |  |  |  |  |  |
| Country:               |                               | Country:                             |  |  |  |  |  |
| Postcode:              | 0x4300                        | Postcode: OXILLE                     |  |  |  |  |  |

| 7. Description of Use, Building Works or Activity   | 8. Description of Existing Use, Building Works or Activity  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):   | What is the existing site use(s) for which the certificate of lawfulness is being sought? Please fully describe each use and                |  |  |  |  |  |  |
| An existing use:  | state which part of the land the use relates to:  |  |  |  |  |  |  |
| Existing building works:  | Subdivision of property   |  |  |  |  |  |  |
| An existing use, building work or activity in breach of a condition:  | Subdivision of property<br>into 6 frats   |  |  |  |  |  |  |
| Being a use, building works or activity which is still going on at the date of this application  If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to: |   |  |  |  |  |  |  |
| dwelling have   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 9. Grounds For Application For A Lawful Developmen  | t Certificate   |  |  |  |  |  |  |
| Please state under what grounds is the certificate sought (you must t   | ick at least one box):  |  |  |  |  |  |  |
| The use began more than 10 years before the date of this application  | ation.  |  |  |  |  |  |  |
| The use, building works or activity in breach of condition began  | more than 10 years before the date of this application.   |  |  |  |  |  |  |
| The use began within the last 10 years, as a result of a change   | of use not requiring planning permission, and there has not been a  |  |  |  |  |  |  |
| change of use requiring planning permission in the last 10 years  | were substantially completed more than four years before the date   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| The use as a single dwelling house began more than four years   |   |  |  |  |  |  |  |
| from planning permission granted under the Act or by the Gene   | ge of use or building work was not development, or that it benefited eral Permitted Development Order).                                     |  |  |  |  |  |  |
| If the certificate is sought on 'Other' grounds please give details:  |   |  |  |  |  |  |  |
| subdivision occurred more than 4-par from the   |   |  |  |  |  |  |  |
| date of this application  |   |  |  |  |  |  |  |
| If applicable, please give the reference number of any existing plans<br>notice affecting the application site. Include its date and the number   | ing permission, lawful development certificate or enforcement er of any condition being breached:   |  |  |  |  |  |  |
| Reference Condition Number:   | Date (DD/MM/YYYY): (must be pre application submission)   |  |  |  |  |  |  |
| Please state why a Lawful Development Certificate should be grante  |   |  |  |  |  |  |  |
| Subdivision occurred over 4 year  | 1 ago and fratt have been   |  |  |  |  |  |  |
| Subdivision occurred over 4 years   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| 10. Information In Support Of A Lawful Development  | Certificate   |  |  |  |  |  |  |
|   | (date must be pre-application submission) (DD/MM/YYYY)  |  |  |  |  |  |  |
| In the case of an existing use or activity in breach of conditions has t  |   |  |  |  |  |  |  |
| If Yes, please provide details of the dates, duration and any disconti<br>your application is based on the claim that a use or activity has<br>interruption occurred:   | nuance of the development which is the subject of this application. If<br>been ongoing for a period of years, please state exactly when any |  |  |  |  |  |  |
| miceria peroni decanted.  |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |
| In the case of an existing use of land, has there been any material ch<br>of use of the land since the start of the use for which a certificate is  | ange Sought? Yes No   |  |  |  |  |  |  |
| If Yes please provide details?  |   |  |  |  |  |  |  |
|   |   |  |  |  |  |  |  |

| Please provide the full postal addr Unit: House number: House name: Address 1: REGENT Address 3: Town: OXFORD County: Postcode (optional): OXL IQU Description of location or a grid re (must be completed if postcode is Easting: Description:  | House suffix:  STRECT                                      | If Yes, pleas you were given application Please tick in known, and Officer name.  Reference:  (must be presented) | e complete ven. (This was more efficient familier) then complete ven.  Date (Perapplication) | advice been s<br>plication?<br>the following<br>till help the au | as possible:      |  |
|--|--|---|--|--|-------------------|--|
| 5. Lawful Development Ce Please state the applicant's interes Owner: Yes No If Yes to Lessee or Occupier plea  | st in the land:  | Yes No  | ey have bee  | Occupier:<br>en informed in                                      |                   |  |
|  |  |   |  |  | Yes No            |  |
| Name Address of  |  | State the nature of their interest (if known)   | State who have been about this   | If No, please<br>explain why not                                 |                   |  |
|  |  |   |  |  |                   |  |
|  |  |   |  |  |                   |  |
|  |  |   |  |  |                   |  |
|  |  |   |  |  |                   |  |
| The state of the s | elated to a member of staff<br>elated to an elected member |   | Do any of th   | ese statemer   | nts apply to you? |  |

| Proposed Housing   |                                       |               |  |           |  |                | Existing Housing   |  |         |                           |  |            |       |
|--|---------------------------------------|---------------|--|-----------|--|----------------|--|--|---------|---------------------------|--|------------|-------|
| Numb   |                                       |               | per of Bedrooms  |           |  | Total          |  | Number of Bedrooms   |         |                           |  |            | Tota  |
|  | 1                                     | 2             | 3  | 4+        | Unknown  | , 5 (6)        |  | 1  | 2       | 3                         |  | Unknown    |       |
| Market<br>Housing  |                                       |               |  | det       | THE PERSON NAMED IN                              |                | Market<br>Housing  |  |         |                           |  |            |       |
| Houses   |                                       |               |  |           |  | a              | Houses   |  |         |                           |  |            | 9     |
| Flats & Maisonettes  | 5                                     | 1             |  |           |  | ъ              | Flats & Maisonettes  | 5  | 1       |                           |  |            | -     |
| Live-Work Units  |                                       |               |  | 1000      |  |                | Live-Work Units  |  |         |                           |  |            | N. P. |
| Cluster Flats  |                                       |               | El P   |           |  |                | Cluster Flats  |  |         |                           |  |            | 0     |
| Sheltered Housing  |                                       |               |  | -         |  |                | Sheltered Housing  |  |         |                           |  |            | - 17  |
| Bedsit/Studios   |                                       |               |  |           |  |                | Bedsit/Studios   |  |         |                           |  |            | 1     |
|  | -                                     |               |  |           | <del>                                     </del> |                | Unknown  |  |         |                           |  | <b> </b>   |       |
| Unknown  | · · · · · · · · · · · · · · · · · · · | 4-1/-         |  |           | 1.61.01  |                |  | alm as T   | etal /a | 1610                      | 1 0 1 0  | ( £ 1 c) - | 2     |
| Market Hou   | ising ic                              | otal (a       | +0+0   | + a + e   | (+ i + g) =                                      |                | Market Hou   | sing i   | otal (a | +0+6                      | + 4 + 6  | +1+g/=     | -     |
| Social Rented<br>Housing   | 1                                     | 2             | 3  | 4+        | Unknown  |                | Social Rented<br>Housing   | 1  | 2       | 3                         | 4+   | Unknown    |       |
| Houses   |                                       |               |  |           |  | 0              | Houses   |  |         |                           |  |            | 12    |
| Flats & Maisonettes  |                                       |               |  |           |  | b              | Flats & Maisonettes  |  |         |                           |  |            | U     |
| Live-Work Units  |                                       |               |  |           |  | T C            | Live-Work Units  |  |         |                           |  |            |       |
| Cluster Flats  |                                       |               |  |           |  | de             | Cluster Flats  |  |         |                           |  |            |       |
| Sheltered Housing  |                                       |               |  |           |  | e i            | Sheltered Housing  |  |         |                           |  |            |       |
| Bedsit/Studios   |                                       |               |  |           |  | F              | Bedsit/Studios   |  |         |                           |  |            |       |
| Unknown  |                                       |               | een,   | 100       | 1112   | o" H           | Unknown  |  |         |                           |  |            | W.    |
| Intermediate<br>Housing  | 1                                     | 2             | 3  | 4+        | Unknown  |                | Intermediate<br>Housing  | 1  | 2       | 3                         | 4+   | Unknown    |       |
| Houses   |                                       |               |  | 10 Sec    | 38413  | 110            | Houses   |  |         |                           |  |            | 11 6  |
| Flats & Maisonettes  |                                       |               |  |           |  | b              | Flats & Maisonettes  |  |         |                           |  |            | 10    |
| Live-Work Units  |                                       |               |  |           |  | ε .            | Live-Work Units  |  |         |                           |  |            | .0    |
| Cluster Flats  |                                       |               |  |           |  | ct             | Cluster Flats  |  |         |                           |  |            |       |
| Sheltered Housing  |                                       |               |  |           |  |                | Sheltered Housing  |  |         |                           |  |            |       |
| Bedsit/Studios   |                                       |               |  |           |  | 1              | Bedsit/Studios   |  |         |                           |  |            |       |
| Deasity Stadios  |                                       |               |  |           |  |                | Unknown  |  |         | been n                    |  |            |       |
| EW M   | sing To                               | rtal (a -     | + b + c  | +d+6      | 2+f+g)=  |                | Intermediate Hou   | sing T   | otal (a | +6+0                      | + d + e  | r+f+g)=    |       |
| EW M   | anny i                                |               | 3  | 4+        | Unknown  |                | Key Worker<br>Housing  | 1  | 2       | 3                         | 4+   | Unknown    |       |
| Unknown  | 1                                     | 2             | The second secon |           |  | a d            | Houses   |  |         |                           |  |            |       |
| Unknown Intermediate Hou Key Worker  | 1                                     | 2             |  |           |  |                | A CAMPAGE TO THE PROPERTY OF THE PARTY OF TH |  |         |                           | - 41   1   |            |       |
| Unknown Intermediate Hou Key Worker Housing  | 1                                     | 2             |  |           |  | - to           | Flats & Maisonettes  | September 18 and 18 |         | the state of the state of | The second secon |            |       |
| Unknown Intermediate Hou Key Worker Housing Houses   | 1                                     | 2             |  |           |  | - <del> </del> | Flats & Maisonettes<br>Live-Work Units   |  |         |                           |  |            |       |
| Unknown Intermediate Hou Key Worker Housing Houses Flats & Maisonettes   | 1                                     | 2             |  |           |  |                |  |  |         |                           |  |            |       |
| Intermediate Hound Key Worker Housing Houses Flats & Maisonettes Live-Work Units Cluster Flats                   | 1                                     | 2             |  |           |  |                | Live-Work Units  |  |         |                           |  |            |       |
| Unknown Intermediate House Key Worker Housing Houses Flats & Maisonettes Live-Work Units                         | 1                                     | 2             |  |           |  |                | Live-Work Units Cluster Flats  |  |         |                           |  |            |       |
| Intermediate Houses Houses Flats & Maisonettes Live-Work Units Cluster Flats Sheltered Housing Bedsit/Studios    | 1                                     | 2             |  |           |  |                | Live-Work Units Cluster Flats Sheltered Housing  |  |         |                           |  |            |       |
| Intermediate Hound Key Worker Housing Houses Flats & Maisonettes Live-Work Units Cluster Flats Sheltered Housing |                                       | 2<br>tal (a + | b+c-   | + d + e - | +f+g)=   |                | Live-Work Units  Cluster Flats  Sheltered Housing  Bedsit/Studios  | sing T   | otal (a | + 6 + 6                   | + d + e  | +f+g)=     |       |

| 11. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed inv the Local Planning Authority has been submitted. The burden or proof in a Lawful Development Certificate is firmly with should be provided. | alid. It will not be considered valid until all information required by  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| The original and 3 copies of a completed dated application form:   | The original and 3 copies of such evidence verifying the information included in the application as you can provide: |  |  |  |  |  |
| 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 correct fee:   |  |  |  |  |  |
| 12. Declaration  I/we hereby apply for a Lawful Development Certificate as described information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.  Signed - Applicant   |  |  |  |  |  |  |
| Date (DD/MM/YYYY):  OS 221 (date cannot be pre-application submission)  WARNING: The amended section 194 of the 1990 Act provides that it is an offencinformation with intent to deceive. Section 193(7) enables the author result of such false or misleading information.  | e to furnish false or misleading information or to withhold material   |  |  |  |  |  |
| 13. Applicant Contact Details  | 14. Agent Contact Details  |  |  |  |  |  |
| Telephone numbers  | Telephone numbers  Extension   |  |  |  |  |  |
| Country code: National number: Extension number:   | Country code: National number: number:   |  |  |  |  |  |
| Country code:  | Country code: Mobile number (optional):  |  |  |  |  |  |
| Country code: Fax number (optional):   | Country code: Fax number (optional):   |  |  |  |  |  |
| Email address (optional):  Email address (optional):  Jindris Coupe & grail.   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| 15. Site Visit   |  |  |  |  |  |  |
| Can the site he seen from a nublic road nublic footnath bridleway or   | other public land?   |  |  |  |  |  |
| Can the site be seen from a public road, public footpath, bridleway or<br>If the planning authority needs to make an appointment to carry<br>out a site visit, whom should they contact? (Please select only one)  | Other (if different from the   |  |  |  |  |  |
| If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)  If Other has been selected, please provide:  | Applicant Other (if different from the agent/applicant's details)  |  |  |  |  |  |
| If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)   | Other (if different from the   |  |  |  |  |  |