

For Official Use Only
Receipt PASSA6

Date 1621

Amount 26-00

Sevenoaks District Council Council Offices Argyle Road Sevenoaks Kent TN13 1HG

Tel: 01732 227000

Householder Application for Planning Permission for works of the Advelling.

Town and Country Planning Act 1990

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. Applic	ant Name and Address	2. Agent Name and Address
Title:	Mn First name: NEIL	Title: First name:
Last name:	BUCHAN	Last name:
Company (optional):		Company (optional):
Unit:	House House suffix:	Unit: House House suffix:
House name:	C/O MAYUIEW HOUSE	House name:
Address 1:	PINKS HILL	Address 1:
Address 2:		Address 2:
Address 3:		Address 3:
Town:	SWANLET	Town:
County:	KENT	County:
Country:		Country:
Postcode:	BN 8 8AD	Postcode:

## 3. Description of Proposed Works

Please describe the proposed works:

SINGLE	STONEY	num	5×1	4 cn1,	. 7	له ۱۲۹۱ س
roof	LIGHTS	AND NE	ري:	NOOF	7-0	ERISTING
S10€	GARAGE	/ CX TOUS	د، ه	FNCO	aren	AT INC
ROOF	LIGHTS					

3. Description of Proposed Works (continued)	
Has the work already started?	
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)
	5. Pedestrian and Vehicle Access, Roads and Rights of Way
4. Site Address Details Please provide the full postal address of the application site.	Is a new or altered vehicle access
House 10 House	proposed to or from the public highway? Yes No
number. Janua	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
House name:	Do the proposals require any diversions,
Address 1: CHANNOCK	extinguishments and/or creation of public rights of way?
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):
Iown: SWANLEY	
County: Kon-	
Postcode (optional): BAS SNL	
6. Pre-application Advice	7. Trees and Hedges
If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).  Please tick if the full contact details are not known, and then complete as much possible:  Officer name:	development?  If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Reference:  Date (DD MM YYYY): (must be pre-application submission)  Details of the pre-application advice received:	Will any trees or hedges need to be removed or pruned in order to carry out your proposal?  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.
8. Parking Will the proposed works affect existing car parking arrangements?  If Yes, please describe:	9. Authority Employee / Member 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

	Existing (where applicable)	Proposed	Not	Dor Kno
Walls	FACE BRICKWORK	FACE DRICKWORK TO MATCH TRISTING		
Roof	TILES MAIN NOOF CHARGE / FATONSION CHITINGS / FELT	CHIPLINGS AND FET		
Windows	U . (. V. C	U. (. V. c		
Doors	U. (.V. c	U . C . U . C		
Boundary treatments e.g. fences, walls)	FONCO	NENS		
/ehicle access and pard-standing	Nwo	NONE		
ighting	None	NONG		
thers lease specify)				
e you supplying additio es, please state referen	nal information on submitted plan(s)/drawing(s)/decces for the plan(s)/drawing(s)/design and access sta	esign and access statement? Yes		<b>₩</b> 0

	· Itanial Land Docla			
11. Ownership Certificates and Ag	icultural Land Decia	ompleted with this applicat	ion form	•
One Certifica	te A, B, C, or D, must be C	Offipieted with the eppera		
Town and Country Planning (Deve certify/The applicant certifies that on the downer* of any part of the land or building to s part of, an agricultural holding**	ppment Management Pro by 21 days before the date which the application rela	ocedure) (England) Order 20 of this application nobody ex ates, and that none of the land	to which the ap	oplication relates is, or
NOTE: You should sign Certificate B, C or application relates but the land is, or is p	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
* "owner" is a person with a freehold interest of ** "agricultural holding" has the meaning giv	r leaseHold interest with at i in by reference to the definit	least / years left to run. tion of "agricultural tenant" in s	section 65(8) of th	e Act.
Signed - Applicant:	Or signed -	Agent:		Date (DD/MM/YYYY):
Jights 17.				
Town and Country Planning (Deve		RSHIP - CERTIFICATE B		
application relates. *"owner" is a person with a freehold interest ** "agricultural tenant" has the meaning giv	or leasehold interest with at n in section 65(8) of the Tov		990	Date Notice Served
** "agricultural tenant" has the meaning giv  Name of Owner / Agricultural Tenant	11)11 3CCt1011 03 (2) 01 1	Address		Date Notice Serveu
LINDSAY FOLKES	28 CHAR	NOCK SWAND	EY BNL	28/05/2021
	<del></del>			
	Orsigne	d - Agent:		Date (DD/MM/YYYY)
Signed - Applicant:	——————————————————————————————————————	u-Agenti		28/05/202
				115

All reasonable so the land or build     * "owner" is a person with	ry Planning (Deve ertifies that: ate A or B can be is teps have been tak ding, or of a part of	egricultural Land Declaration CERTIFICATE OF OWNERSHIP elopment Management Procedure issued for this application element of find out the names and address fit, but I have/ the applicant has been or leasehold interest with at least 7 years in section 65(8) of the Town and Commence in the contract of the transport of the transpor	- CERTIFICATE C re) (England) Order 2015 Cel resses of the other owners* an	<b>tificate under Article 14</b> d/or agricultural tenants** o
Name of Owner / Agricu	ultural Tenant	Addi	ress	
				Date Notice Served
Notice of the application b	as boon publish	in the following newspaper		
circulating in the area wh	ere the land is situ	a in the following newspaper ated):	On the following date (	which must not be earlier
			Than 21 days before the	date of the application):
igned - Applicant:		Or signed - Agent:		
		- Jane		Date (DD/MM/YYYY):
		ERTIFICATE OF OWNERSHIP - CE		
All reasonable steps date of this applicant have/ the applicant fowner" is a person with a fer	s have been taken to ion, was the owne has been unable to	ERTIFICATE OF OWNERSHIP - CE oment Management Procedure) (a opplication for find out the names and addresse or* and/or agricultural tenant** of a o do so, assehold interest with at least 7 years section 65(8) of the Town and Count	es of everyone else who, on th iny part of the land to which th	
otice of the application has				1
otice of the application has rculating in the area where	been published ir the land is situate	the following newspaper ed):	On the following date (wi	nich must not be earlier
rtice of the application has rculating in the area where	the land is situate	n the following newspaper ed):	On the following date (which than 21 days before the d	nich must not be earlier ate of the application):
J area wriere	the land is situate	ea):	On the following date (w) than 21 days before the d	nich must not be earlier ate of the application):
January Wilcie	been published ir the land is situate	Or signed - Agent:	On the following date (wi than 21 days before the d	nich must not be earlier ate of the application):  Date (DD/MM/YYYY):
otice of the application has reulating in the area where ined - Applicant:  Planning Applications are a served the fellowing applications are area of the fellowing applications.	e the fand is situate	Or signed - Agent:	On the following date (wi than 21 days before the d	ate of the application):

13. Declaration  I/we hereby apply for planning permission/consent as described in th information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed - Agent:	is form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY): $28/05/202i$ (date cannot be pre-application)
14. Applicant Contact Details  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):
16. Site Visit  Can the site be seen from a public road, public footpath, bridleway  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:  Contact name:	or other public land? Yes No Applicant Other (if different from the agent/applicant's details)  Telephone number:

¥., -