

For Official Use Only

Receipt

Date

Amount

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

Tel: 01732 227000

A.D

First name:

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

Publication of planning applications on council websites

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Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Title:

2. Agent Name and Address

MR

Please complete using block capitals and black ink.

MR May First name:

1. Applicant Name and Address

Title:

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

Last name: 100 ELLS	Last name: HELLARD
Company (optional):	Company (optional): ALBANY BUILDING DESIGN 17 Bourne Mead
Unit House 142 House suffix:	Unit: Hot Bexiey Kent DA5 1PJ 01322 522528
House name:	House name:
Address 1: SPRIJGCEOFT	Address 1:
Address 2: HARTLEY	Address 2:
Address 3:	Address 3:
TOWN: COYGFIELD	Town:
County: KEVT	County:
Country:	Country:
Postcode: DA3 8AS	Postcode:
3. Description of Proposed Works	
Please describe the proposed works:	
PART 1ST PLOOP, PART	TWO STOREY
Extr, to FRONT REA	AR
	20

3. Description of Proposed Works (continued)	4
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
Please provide the full postal address of the application site.	Is a new or altered vehicle access
House House	proposed to or from the public highway? Is a new or altered pedestrian access
House	proposed to or from the public highway? Yes
Address 1: AS NO I	Do the proposals require any diversions, extinguishments and/or creation of public Yes
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)/ drawing(s):
Address 3:	
Town:	
County:	
Postcode (optional):	
Has assistance or prior advice been sought from the local authority about this application? 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: Reference: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your boundary? Yes No If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings: Will any trees or hedges need to be removed or pruned in order to carry out your proposal? Yes No 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.
	9. Council Employee / Member
8. Parking Will the proposed works affect existing car parking arrangements? Yes No	Is the applicant or agent related to any member of staff or elected member of the council?
W. Are please describe.	If Yes, please provide details:
NEW GARAGE SPACE TO REAR & FROMALE PARKING REMAINS IN FULL USE	AD 2000 PS US 23:25 \$ \$Poutsion: 1 59 \$

· ·	Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
	Brick	Brick and		.,	•
Walls		Brick and Or PAINTED RENDER			
			 		
	TILED	TILED			
Roof					
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	nove	uprc.			
Windows	DENCES	DISLACE		$ \Box $	
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Doors))	<i>p</i>			
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Soundary treatments					. 5,
e.g. fences, walls)			4		ë.

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ehicle access and ard-standing			য		
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thers lease specify)					
you supplying addit	ional information on submitted plan(s).	drawing(s)/design and access statement?		<u> </u>	Yes UNo
	nces for the plan(s)/drawing(s)/design	A		السا	Yes L No

	completed, together with the apricultural Holdings Cert	ficate under Article 7
Town and Country Pla	nning (General Development Procedure) Order 1995 Certifine day 21 days before the date of this application nobody exciptorest or leasehold interest with at least 7 years left to run) of an	ept myself/ the applicant was the
r lowner is a person with a neemold	he day 21 days before the date of this application hobody exc interest or leasehold interest with at least 7 years left to run) of ar	
the application relates.	Or signed - Agent	Date (DD/MM/YYYY):
ed - Applicant:	or signed and the state of the	14/6/21
· ·		
	CERTIFICATE OF OWNERSHIP - CERTIFICATE B	E Article 7
Town and Country Pla	nning (General Development Procedure) Order 1895 Certi	else (as listed below) who, on the da
		r leasehold interest with at least 7 yea
run) of any part of the land or bui	luling to writer this application.	Date Notice Served
Name of Owner	Address	
	1	
**		
1		
		Date (DD/MM/YYY
red - Applicant:	Or signed - Agent	
		11
tify/ The applicant certifies that:	CERTIFICATE OF OWNERSHIP - CERTIFICATE C lanning (General Development Procedure) Order 1995 Certible issued for this application	nors (owner is a person with a freehold
rtify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be interest or leasehold interest v been unable to do so.	CERTIFICATE OF OWNERSHIP - CERTIFICATE C lanning (General Development Procedure) Order 1995 Certification be issued for this application en taken to find out the names and addresses of the other own with at least 7 years left to run) of the land or building, or of a particular series of the land or building.	nors (owner is a person with a freehold
tify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be interest or leasehold interest v	be issued for this application	nors (owner is a person with a freehold
tify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be interest or leasehold interest v been unable to do so.	be issued for this application	ners (owner is a person with a freehold rt of it , but I have/ the applicant has
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11. Certificates (continued			
The applicant certifies th	10 L ₁	SHIP - CERTIFICATE D Procedure) Order 1995 Certificate u	nder Article 7
 Certificate A cannot be is 	sued for this application		
		addresses of everyone else who, on the afreehold interest or leasehold interest w	
) F = 1 = 1 = 1 = 1 = 1	which this application relates, but I h	ave/ the applicant has been unable to a	rith at least 7 years left to run do so.
The steps taken were:			
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		•	\$ - 75
Matics of the section is			i e
(circulating in the area where the	n published in the following newspap		which must not be earlier
		ulari 21 days before the	date of the application):
Signed Applicant			
Signed - Applicant:	Or signed - A	gent	Date (DD/MM/YYYY)
,	.		
			<u> </u>
Town and Country	AGRICULTURAL HOLDI	NGS CERTIFICATE rocedure)Order 1995 Certificate und	
gricultural Land Declaration You	Must Complete Either A or B	rocedure/Order 1995 Certificate unc	ler Article 7
Signed - Applicant:	he application relates is, or is part of, a	an agricultural holding.	
N D H 1 1 1 0		central / / / /	Date (DD/MMAYYYY)
4 Dicellos	AGE CAT)		14621
B) I have/ The applicant has gi	ven the requisite notice to every pers	on other than myself/ the applicant who	- 1,11(5)
perore the date of this application, as listed below:	was a tenant of an agricultural holding	ion other than myself/ the applicant which the on all or part of the land to which the	io, on the day 21 days
Name of Tenant			
		Address	Date Notice Served
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, a			
	22 26	*	
ned - Applicant:			
- Aprilative	Or signed - Age	ent	Date (DD/MM/YYYY):
Planning Application Re	quirements - Checklist		
ase read the following chacklist to		rmation in support of your proposal. F	
cover riginini Authority has bee	or application being deemed invalid.	rmation in support of your proposal. F It will not be considered valid until all	allure to submit all information required by
Childhigh guid 2 CODHes Ot a	The original and 3 copie	SOFA LBANK TR	ZAJEER
opleted and dated application for	m: design and access stater	ment where	SENT X
original and 3 copies of a plan what ifies the land to which the applications of the second s	proposed works fall with the following designated	in one of he original and 3	conies of the
tes drawn to an identified scale showing the direction of North:	 National Park 	(Agricultural Holdin	article / Certificate
	Site of special scientific Conservation area	interest	
original and 3 copies of other pla drawings or information necessar	• Area of outstanding na	tural beauty The original and 3 c	opies of the
ribe the subject of the application	• World Heritage Site • The Broads	(A, B, C or D - as ap	Ownership Certificate
Declaration			plicable):
hereby apply for planning			
mation.	sion/consent as described in this for	m and the accompanying plans/drawin	gs and additional
ed - Applicant:	Occionada		
DHELLARD (A	REST)	Date (DD/MN	
		114 6	21 (date cannot be

14. Applicant Contact Details	15. Agent Contact Details
Country code: National number: Country code: National 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)	Applicant agent/applicant's details)
If Other has been selected, please provide: Contact The selected of the sele	Telephone number:
Email address	

OR CONTACT AZENT, (ANY TIME)