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OFFICE USE	
P/	
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Date rec'd	

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

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

. Applicant I	House number: Stant Punts First name: Phouse suffix: Stant Punts SHorwall	2. Agent Name Title: Last name: Company (optional): Unit:	House number: 107 House suffix: 4 May 14 May
Address 3: Town: County: Postcode:	PO 30	Town: County: Country: Postcode:	BNIISBE
Please descr	otion of Proposed Works tibe the proposed works: GARA	you str	

Has the work already started? Yes No	
If Yes, please state when the work was started (DD/MM/YYYY):	Myn 2021 (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 Wa
Please provide the full postal address of the application site. Unit: House number: House suffix:	Is a new or altered vehicle access proposed to or from the public highway? Is a new or altered pedestrian access
House name: OUD STRUK PURK	proposed to or from the public highway? Yes Wo Do the proposals require any diversions,
Address 1: FARRIEU UMY	extinguishments and/or creation of public rights of way?
Address 2: SHORWU	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:	
County:	
Postcode (optional): Po 30	
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:
Pafaranca:	
Reference:	Will any trees or hedges need
Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received: BS MM 1110	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.

	Existing (where applicable)	ernally. Include type, colour and name for each material: Proposed	Not applicable	Don't Know
Valls		CHORR CLAODING		
Roof		FUT		
Windows		WOOD		
Doors				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard-standing				
Lighting				
Others (please specify)				
Are you supplying ac	dditional information on submitted ferences for the plan(s)/drawing(s)/	plan(s)/drawing(s)/design and access statement? design and access statement:	Yes	□ N

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 with at least 7 years left to run.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
		30 JUN 2021
Town and Country Planning (Development Country Planning (Developme	TIFICATE OF OWNERSHIP - CERTIFICATE B ent Management Procedure) (England) Order 20 pplicant has given the requisite notice to everyone the owner* and/or agricultural tenant** of any particular of the section of the Town and Country Planning Act 19 per 19	e else (as listed below) who, on the da art of the land or building to which thi
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

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 formation and 3 copies of a plan which little states and a submitted. The original and 3 copies of a plan which identifies the land to which the application formation to an identified scale and showing the direction of North. The original and 3 copies of of the plans and drawings or information necessary to describe the subject of the application is submitted electronically of, the LPA indicate liner a smaller number of copies is required. Uses me gase accept supporting documents in electronic formation or contact their planning department to discuss these options. 13. Declaration We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. We confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuines of country code: Applicant Contact Details Telephone numbers Country code: Mobile number (optional): Email address (optional): Telephone numbers Country code: Fax number (optional): Email address (optional): Telephone number: Telephone number: Date (DD/MMYYYY): 30	12. Planning Application Requirements - C	hooklint	
Inteoriginal and 3 copies' of a completed and dated application form: The original and 3 copies' of a plan which identifies the land to which the application relates drawn to an identified scale and showing fine direction of North. The original and 3 copies' of other plans and drawings or information necessary to describe the subject of the application: National legislation specifies that the application: National legislation specifies that the application: National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents for the subject of the applicant must provide the original plus three copies of the form and supporting documents for the part of the provide the original plus three copies of the form and supporting documents for the part of the provide the original plus three copies of the form and supporting documents for the part of	I FIGOR LEAG THE TOHOWING checklist to made		support of your proposal. Failure to submit all be considered valid until all information required by
13. Declaration I/we hereby apply for planning permission/consent 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. Signed - Applicant: Date (DD/MM/YYYY): 30 JN 201 (date cannot be pre-application) 14. Applicant Contact Details Telephone numbers Country code: National number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Telephone number: Country code: Fax number (optional): Email address (optional): Email a	The original and 3 copies* of a completed and dated application form: 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 pecessary to	original and 3 copies* of a gn and access statement if losed works fall within a servation area or different to a	The correct fee: The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14
Whe hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional genuine opinions of the person(s) giving them. Signed - Applicant:	Toda dall'effect your LPA's Website for information or con	provide the original plus three electronically or, the LPA ind nic format by post (for examplated their planning departmentact their planning departmentact	e copies of the form and supporting documents (a icate that a smaller number of copies is required. le, on a CD, DVD or USB memory stick). ent to discuss these options.
14. Applicant Contact Details Telephone numbers Country code: National number:	I/we hereby apply for planning permission/consent as d information. I/we confirm that, to the best of my/our known genuine opinions of the person(s) giving them.	escribed in this form and the bowledge, any facts stated are	Date (DD/MM/YYYY): [20] Low 2004 (date cannot be
Telephone numbers Country code: National number:	14 Applicant C. I. I. T.		pre-application)
16. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) of Other has been selected, please provide: Contact name: Telephone number:	Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Extension number: Country code: Country code:	National number: Mobile number (optional): Fax number (optional):
Can the site be seen from a public road, public footpath, bridleway or other public land? 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: Telephone number:		Email address (optional):
imail address:	16. Site Visit Can the site be seen from a public road, public footpath, be out a site visit, whom should they contact? (Please select or of Other has been selected, please provide: Contact name:	o carry nly one) Agent	Applicant Other (if different from the agent/applicant's details)
	mail address:		