

Planning and Development Control

Gloucester Road, Tewkesbury, Gloucestershire, GL20 5TT

Email: developmentapplications@tewkesbury.gov.uk Website: www.tewkesbury.gov.uk Telephone: 01684 295010

Fax: 01684 272227

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 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.

	ant Name and Address	Z. Agent	Name and Address
Title:		Title:	First name: DENNIS
Last name:		Last name:	RAYTON
Company (optional):		Company (optional):	DENNIS L RAYTON LAD.
Unit:	House House suffix:	Unit:	House house suffix:
House name:	SOUTH VIEW COTTAG	House name:	HOLMBURY
Address 1:	SILK MILL LAWE	Address 1:	GO WILLOW BANK BOAD
Address 2:		Address 2:	ALDERTON
Address 3:		Address 3:	TENKESBURY
Town:	WINCHCOMBE	Town:	
County:	Guos	County:	Gros
Country:		Country:	
Postcode:	GUS4 5HZ	Postcode:	C1208NJ
3. Descr	iption of Proposed Works		
Please desc	cribe the proposed works:		
	ALTERATIONS	to be	
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	DITERATIONS OUTBUILDING	AND E	XTERNAL
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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)
4. Site Address Details	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
Unit: House number: House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name: South VIEW COTTAGE	proposed to or from the public highway? Yes No Do the proposals require any diversions,
Address 1: SILK MILL LANE	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):
Town: WINCHCOMEE	
County: Gres	
Postcode (optional): GIS4 5HZ	
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: Date (DD MM/YYYY): (must be pre-application submission) Details of the pre-application advice received:	are within falling distance of your proposed development? 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? 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: PARKING DEED TO BE INCREASED	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 If Yes, please provide details of the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	Don't
Walls	MATE STONE BANTED RENDER	BANTED BENDER DEED		
Roof	SLATES	SLOTE ATTEN + HIBREGLASS FLOT		
Windows	COSEMENOS	CADEMANTS		
Doors	timber	Paule Wanted 1921		
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard-standing	Geara	GRAVEL		
Lighting			D	
Others (please specify)			Ø	
If Yes, please state refe	ditional information on submitted plan(s)/drawing rences for the plan(s)/drawing(s)/design and access a 21:1942:01-1	ss statement:	es [No

1 Ownership Certificates			* /	
Town and Country Planning	CERTIFICAT Development Mar	TE OF OWNERSHIP	- CERTIFICATE A	rtificate under Article 12
eertify/The applicant certifies that or wner (owner is a person with a freehol hich the application relates. igned - Applicant:	I the day 21 days bo Id interest or leaseho	erore the date of thi	s application nobody except n	the land or building to Date (DD/MM/YYYY):
igned - Applicanc		I Dans		2 (C) 5:
		PENNIS	13aytan	2/6/21
Town and Country Planning (certify/ The applicant certifies that I I days before the date of this applicant to run) of any part of the land or be	Development Mar have/the applicant ation, was the owner	has given the requ er (owner is a person	re) (England) Order 2010 Cer isite notice to everyone else (a with a freehold interest or lease	is listed below) who, on the day
Name of Owner	anding to which the	Address		Date Notice Served
igned - Applicant:	1	Or signed - Agent		Date (DD/MM/YYYY):
5				
rertify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be interest or leasehold interest w been unable to do so. he steps taken were:	be issued for this a en taken to find out with at least 7 years le	pplication the names and add oft to run) of the land	resses of the other owners (on l or building, or of a part of it ,	mer is a person with a freehold out I have/ the applicant has
ne steps taken were.				
Name of Owner		Ad	dress	Date Notice Served
		/		
	/			
lotice of the application has been po circulating in the area where the lan	ublished in the follo d is situated):	wing newspaper	than 21 days before t	(which must not be earlier he date of the application):
igned - Applicant;		Or signed - Agent	:	Date (DD/MM/YYYY):

 Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the control of the certifies that: 	CERTIFICATE OF OWNERSHIP - Ci elopment Management Procedure)	es of everyone else who on the interest or leasehold interest wi	ne day 21 days before the th at least 7 years left to run)
		*	-
Notice of the application has been publish circulating in the area where the land is s			which must not be earlier date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
			7 - 1 - 2
Agricult (A) None of the land to which the applica Signed - Applicant:	Or signed - Agent:	ral	Date (DD/MM/YYYY)
	DENNIS	arylan	3-6-21
(B) I have/ The applicant has given the red before the date of this application, was a as listed below: Name of Tenant	tenant of an agricultural holding on all	or part of the land to which th	Date Notice Served

Signed - Applicant:	Or signed - Agent:		. Date (DD/MM/YYYY
			_1
Please read the following checklist to make information required will result in your apthe Local Planning Authority has been subthe original and a copies of a completed and dated application form: The original and a copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	re sure you have sent all the information plication being deemed invalid. It will smitted. The original and 3 copies of a design and access statement in proposed works fall within a	The correct fee: The original and completed, date Certificate (A, B,	all information required by 200 3 copies of the d Ownership C or D - as applicable):
The original and a copies of other plans and drawings or information necessary to describe the subject of the application:	V	The original and completed, date (Agricultural Hol	d Article 12 Certificate

Signed - Applic	ns of the person(s) giving them.	Or signed - Agent:		ate (DD/MM/YYY	M:
		Davin	8 RAYTO	m 3/6/21	(date cannot be pre-application
5. Applicar	nt Contact Dotails		16. Agent C	ontact Details	
Telephone num	abers		Telephone num	abers	
Country code:	National number:	Extension number:	Country code:	National number:	Extension number:
Country code:	Mobile number (optional):		Country code:	Mobile number (optional):	
Country code:	Fax number (optional):		Country code:	Fax number (optional):	
Email address (ontional):		Email address (d	optional):	
17. Site Visi	t de la companya de l			/	
Can the site be	seen from a public road, public f	lootpath, bridleway or	r other public land	d? Yes No	**
f the planning a out a site visit, v	authority needs to make an appo whom should they contact? (Plea	pintment to carry ase select only one)	Agent	Applicant Other (i	(if different from the applicant's details)
f Other has bee	en selected, please provide:				