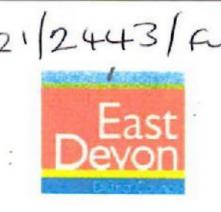


Planning Department, East Devon District Council Knowle, Sidmouth, Devon EX10 8HL

Tel: 01395 517475 Email: planning@eastdevon.gov.uk Website: www.eastdevon.gov.uk/planning



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.

First name:

1. Applicant Name and Address

MREMRS

LEMIN

Title:

Last name:

Company

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

Title:

Last name:

2. Agent Name and Address

WRIGHT

First name:

D

MR

(optional):		(optional):					
Unit:	House 1 House suffix:	Unit:	House 31 House suffix:				
House name:		House name:					
Address 1:	MADISON CLOSE	Address 1:	BOURNRISE				
Address 2:		Address 2:	PINHOE				
Address 3:		Address 3:					
Town:	STOKE CANON	Town:	EXETER				
County:	DEVON	County:	DEVON				
Country:		Country:					
Postcode:	EX54AG	Postcode:	EX4 8QD				
3. Description of Proposed Works							
Please desc	cribe the proposed works:						
PROPOSED PITCH ROOF TO DORMER WINDOW TO REPLACE EXISTING FLAT ROOF TO FRONT / EAST ELEVATION EAST DEVON DISTRICT COUNCIL ECONOMY							
			1 3 SEP 2021 ACK CIRC SEEN FILE				

3. Descri	iption of Proposed Works (continued)	
Has the wo	rk already started? Yes No	
If Yes, pleas	se state when the work was started (DD/MM/YYYY):	
Has the wo	rk already been completed?	(date must be pre-application submission)
If Yes, pleas	se state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site A	ddress Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please prov	ride the full postal address of the application site.	Is a new or altered vehicle access
Unit:	House 1 House suffix:	proposed to or from the public highway? Yes No
House name:		Is a new or altered pedestrian access proposed to or from the public highway? Yes No
Address 1:	MADISON CLOSE	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2:		rights of way? Yes V No If Yes to any questions, please show details on your plans or
Address 3:	STOKE CANON	drawings and state the reference number(s) of the plan(s)/ drawing(s):
Town:	NREXETER	
County:	DEVON	
Postcode (optional):	EX54AG	
If Yes, please you were giv application r Please tick if	complete the following information about the advice ven. (This will help the authority to deal with this more efficiently). the full contact details are not then complete as much possible:	property or on adjoining properties which 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
	Date (DD MM YYYY): -application submission) e pre-application advice received:	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.
B. Parking		Q Austhority Employee (187
Will the prop	osed works affect arking arrangements? Yes No	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
		11

	Existing (where applicable)	Proposed .	Not applicable	Don't Know	
Walls	FRONT ELEVATION IN BRICK	FRONT ELEVATION IN RENDER			
Roof	MAIN ROOF - INTERLOCKING TILES DORMER WINDOW FELT FLAT	MAIN ROOF - INTERLOCKING TILES DORMER WINDOW INTERLOCKING TILES			
Windows	WHITE UPVC	COLOUR COATED ALUMINIUM			
Doors	WHITE UPVC	COLOUR COATED ALUMINIUM			
Boundary treatments (e.g. fences, walls)	BRICK WALL	BRICK WALL			
Vehicle access and hard-standing			d		
Lighting			Ø		
Others (please specify)	PLASTIC GUTTERS	PLASTIC GUTTERS			
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No Yes No PLANS & ELEVATIONS REFERENCED 21/19					

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. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Address Date Notice Served Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

12. Planning Application Requirements - Checklist								
Please read the following checklist to make sure you have sent all t	the information in support of your proposal. Failure to submit all invalid. It will not be considered valid until all information required by							
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 necessary to describe the subject of the application:	ss statement if fall within a The original and 2 period of the							
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.								
13. Declaration I/we hereby apply for planning permission/consent as described in information. I/we confirm that, to the best of my/our knowledge, as genuine opinions of the person(s) giving them.	this form and the accompanying plans/drawings and additional ny facts stated are true and accurate and any opinions given are the							
Signed - Applicant: Or signed - Agen	t: o Date (DD/MM/YYYY):							
	07/09/2021 (date cannot be pre-application)							
14. Applicant Contact Details	15. Agent Contact Details							
Telephone numbers	Telephone numbers							
Country code: National number: Extension number: 01392 841364	Country code: National number: Extension number:							
Country code: Mobile number (optional): Country code: Fax number (optional):	Country code: Mobile number (optional):							
Email address (optional):	Country code: Fax number (optional):							
	Email address (optional):							
16. Site Visit								
Can the site be seen from a public road, public footpath, bridleway of	or other public land? Yes No							
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: Agent Applicant Other (if different from the agent/applicant's details)								
Contact name: Telephone number:								
Email address:								