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Courier

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990 900 800

Privacy Notice

Collected by

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)'.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Planning Services

Council Offices, Weeley, Essex CO16 9AJ Email: planning.services@tendringdc.gov.uk

Website: www.tendringdc.gov.uk Telephone: 01255 686161

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applic	ant Nam	e and Addre	ess			
Title:	MM	First name:	GRMMA			
Last name:	Sm	SMITH				
Company (optional):						
Unit:		House number.	39 House suffix:			
House name:						
Address 1:	800	otesto	n Road.			
Address 2:	Dov	Dovencourt				
Address 3:						
Town:		mich	1016			
County:	ES	yex				
Country:						
Postcode:	C01.	2 4HF				

Title:	MX	First name:	indy		
Last name	Whalley				
Company (optional):					
Unit:		House number:	House suffix:		
House name:	THE	ord craw	NOFI STATE	12	
Address 1:	STO	NA STRKE	AT		
Address 2:					
Address 3:					
Town:	Mon	enteum			
County:	255	RX			
Country:	N. A. E.				
SECOND OF V					

3. Description of Proposed Works Please describe the proposed works:	
Rear F-xtension	
Has the work already started?	No
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission
Has the work already been completed?	No
If Yes, please state when the work was completed (DD/MM/YYY	Y): (date must be pre-application submission)
4. Site Address Details Please provide the full postal address of the application site. Unit: House number: 30 House suffix: House name: Address 1: Porteston Vood Address 2: Dover court Address 3: Town: House number: 4 House suffix: County: Postcode (optional): Coll 4 HK 6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application?	5. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed to or from the public highway? Yes No Is a new or altered pedestrian access proposed to or from the public highway? Yes No Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes No 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): 7. Trees and Hedges Are there any trees or hedges on your own property or on adiciping properties which
authority about this application? If Yes, please complete the following information about the adv 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:	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:
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 work	ks affect existing car parking arrangements?	☐ Yes ☐ N	No		
If Yes, please describe:			- Allega		
means related, by birth	loyee / Member iple of decision-making that the process is on or otherwise, closely enough that a fair minus bias on the part of the decision-maker in the	ded and informed ob	server, having considere		
	g statements apply to you and/or agent?	Yes No	With respect to the au (a) a member of staff (b) an elected member (c) related to a member (d) related to an elected	er er of staff	
If Yes, please provide of	details of their name, role and how you are re	elated to them.	2 10 07 2 2		
10. Materials					
If applicable, please sta	ite what materials are to be used externally.	Include type, colour	and name for each mate		
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls	BRICK - RENDER	TI	Míz		
Roof	Plain Tiles	て、	ME		
Windows	NBNC	Tr	15		
Doors	NENT	Tm	R		
Boundary treatments (e.g. fences, walls)					

Vehicle access and hard-standing			
Lighting			
Others (please specify)			
Are you supplying addition If Yes, please state reference	I information on submitted plan(s)/drawing(s)/design s for the plan(s)/drawing(s)/design and access statem	n and access statement? Yes ent:] No

11. Ownership Certificates and Agricultural Land Declaration

Signed - Applicant:

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**

Or signed - Agent:

Date (DD/MM/YYYY)

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.

		20/8/2021
Town and Country Planning (Development M I certify/ The applicant certifies that I have/the applica 21 days before the date of this application, was the or application relates. ""owner" is a person with a freehold interest or leasehold "" agricultural tenant" has the meaning given in section.	Int has given the requisite notice to everyone wher* and/or agricultural tenant** of any pa interest with at least 7 years left to run.	e else (as listed below) who, on the day art of the land or building to which this
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

11. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. * "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 The steps taken were: Name of Owner / Agricultural Tenant Address Date Notice Served On the following date (which must not be earlier Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else 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 to which this application relates, but I have/ the applicant has been unable to do so. * "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

The steps taken were:						
Notice of the application has been published in the following newspaper	On the following date (which must not be earlier					

(circulating in the area where the land is situated): than 21 days before the date of the application):

Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY)

12. Planning	Application Requiremen	ts - Checklist				
information requ	following checklist to make sure uired will result in your application ng Authority (LPA) has been sub-	on being deemed inv	information in su valid. It will not be	pport of you considered	r proposal. Failure to valid until all informat	submit all ion required by
The original and 3 copies* of a The original and 3				The co	orrect fee:	
	dated application form: 3	design and access a proposed works fal	ll within a	The o	riginal and 3 copies* of	of the
identifies the lar	nd to which the application	Conservation area of World Heritage Site			leted, dated Ownersh	ip
	e direction of North:	Listed Building:	te, or relate to a Certificate (A, B, C or D – as applicable) and Article 14			
	13 copies* of other plans			Certifi	icate (Agricultural Hol	dings):
and drawings or	rinformation necessary to bject of the application:			70.	of April	hO
LPAs may also a	ation specifies that the applicant les), unless the application is sub ccept supporting documents in e our LPA's website for information	electronic format by	post (for example,	on a CD, DV	D or USB memory stic	documents (a s is required. k).
13. Declarat	ion				TOTAL PARTIES	THE STATE S
information. I/w	bly for planning permission/consider e confirm that, to the best of myons of the person(s) giving them.	ent as described in the lour knowledge, any	nis form and the a facts stated are tr	ccompanying rue and accur	plans/drawings and ate and any opinions	additional given are the
Signed - Applica	ant:	Or signed - Agent:			Date (DD/MM/YYYY)	
					2018/2021	(date cannot be pre-application
14. Applican	t Contact Details		15. Agent C	ontact Det	ails	
Telephone num						
relephone num	Dels	Extension	Telephone num	nbers		Extension
Country code:	National number:	number:	Country code:	National n	umber:	number:
Country code:	Country code: Mobile number (optional):		Country code: Mobile number (optional):			
Country code:	Fax number (optional):		Country code:	Fax numbe	er (optional):	
Email address (c	optional):		Email address (optional):		
16. Site Visit					College of the	
Can the site be s	een from a public road, public fo	ootpath, bridleway or	other public land	Yes	□No	
	uthority needs to make an appo					iter t
out a site visit, w	hom should they contact? (Pleas	e select only one)	Agent	Appli Appli		different from the plicant's details)
	n selected, please provide:					
Contact name:			Telephone num	ber:		
Chim	MA SMITH,					
Email address:	Major Elisi					
	MARINE MAY AN		Library Carolina	- I more		

Tendring
District Council This is a scan of the original document



Name: - By Russell
Date: 23/08/21