

## Application for Planning Permission. Town and Country Planning Act 1990

### Privacy Notice

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 its obligations in regards to the processing of your application. Please refer to its 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:



For Official Use Only	
Receipt	<input type="text"/>
Date	<input type="text"/>
Amount	<input type="text"/>

Sevenoaks District Council  
Council Offices  
Argyle Road  
Sevenoaks  
Kent  
TN13 1HG  
Tel: 01732 227000

### Publication of applications on 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 Local Planning 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. Applicant Name and Address

Title:	<input type="text" value="MR"/>	First name:	<input type="text" value="THIRUCHELVAM"/>
Last name:	<input type="text" value="RAVICHANDRAN"/>		
Company (optional):	<input type="text"/>		
Unit:	<input type="text"/>	House number:	<input type="text" value="3"/>
		House suffix:	<input type="text"/>
House name:	<input type="text"/>		
Address 1:	<input type="text" value="MANSE PARADE"/>		
Address 2:	<input type="text" value="LONDON ROAD"/>		
Address 3:	<input type="text"/>		
Town:	<input type="text" value="SWANLEY"/>		
County:	<input type="text"/>		
Country:	<input type="text"/>		
Postcode:	<input type="text" value="BR8 8DA"/>		

#### 2. Agent Name and Address

Title:	<input type="text" value="MR"/>	First name:	<input type="text" value="SHAN"/>
Last name:	<input type="text" value="THIRUKUMARAN"/>		
Company (optional):	<input type="text"/>		
Unit:	<input type="text"/>	House number:	<input type="text" value="7"/>
		House suffix:	<input type="text"/>
House name:	<input type="text"/>		
Address 1:	<input type="text" value="CARDINAL DRIVE"/>		
Address 2:	<input type="text"/>		
Address 3:	<input type="text"/>		
Town:	<input type="text" value="HAINAULT"/>		
County:	<input type="text" value="ESSEX"/>		
Country:	<input type="text"/>		
Postcode:	<input type="text" value="IG6 2SJ"/>		