



# Householder Application for Planning Permission for works or extension to a dwelling. 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 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:**



For Official Use Only
Receipt
Date
Amount

Sevenoaks District Council Council Offices Argyle Road Sevenoaks Kent TN13 1HG

Tel: 01732 227000

### **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. Applie	cant Name and Address	2. Agent Name and Address
Title:	AR +MRS First name: HELL AND SIMONE	Title: First name:
Last name:	MAHAUD	Last name:
Company (optional):		Company (optional):
Unit:	House number: 55 House suffix:	Unit: House number: House suffix:
House name:		House name:
Address 1:	HIGH STREET	Address 1:
Address 2:		Address 2:
Address 3:		Address 3: SEVENOAKS DISTRICT COUNCIL
Town:	FARHIHOHAM	Town: REC'D 1 1 NOV 2021
County:	KENT	County:
Country:	ENGLAND	Country: Cou
Postcode:	DA4 ODB	Postcode:
		**************************************

Has the work already been completed?  Yes No  If Yes, please state when the work was completed (DD/MM/YYYY):  (date must be pre-application submission)  4. Site Address Details  Please provide the full postal address of the application site.  Unit:	3. Description of Proposed Works				
Hes the work already started?   Yes   No   If Yes, please state when the work was started (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed?   Yes   No   If Yes, please state when the work was completed?   Yes   No   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   Sa new or aftered vehicle access, Roads and Rights of Way Is a ne	Please describe the proposed works:				
Hes the work aready started?   Yes   No   If Yes, please state when the work was started (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed?   Yes   No   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   If Yes, please state when the work was completed (DD/MM/YYY):   (date must be pre-application submission)   Sa new or aftered vehicle access, Roads and Rights of Way Sa new or aftered vehic	NEW INFILL GROUND FLOOR REAR EXTENSION AND				
Has the work already started?   Yes					
If Yes, please state when the work was started (DD/MM/YYYY):  (date must be pre-application submission)  If Yes, please state when the work was completed?					
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### A Site Address Details  ### A Site Address Details  ### Address Details  ### House   Splease provide the full postal address of the application site.  ### House   Splease provide the full postal address of the application site.  ### House   Splease to from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No is a new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it has new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it was new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it was new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it was new or altered pedestrian accoss proposed to or from the public highway?   Yes   No it was new or altered pedestrian acco	If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)			
### Assistance or prior advice been sought from the local authority about this application more efficiently.    Yes, please complete the following information about the advice application more efficiently.   Yes please to five more efficiently.   Pease tock if ihe public as much possible:	Has the work already been completed? Yes No				
### Assistance or prior advice been sought from the local authority about this application more efficiently.    Yes, please complete the following information about the advice application more efficiently.   Yes please to five pre-application submission]   Officer name:	If Yes, please state when the work was completed (DD/MM/YYYY)	(date must be pre-application submission)			
Please provide the full postal address of the application site.  Unit:					
Unit:					
Suffix   Summer   S					
Do the proposals require any diversions, extinguishments and/or creation of public gills to dway?  Address 2:  Address 3:  Town: FARMING HAM  County: KENT  Postcode (poptional):  Officer name:  Date (DD MM YYYY):  (must be pre-application submission)  Details of the pre-application advice received:  Do the proposals require any diversions, extinguishments and/or creation of public gills are reference number(s) of the plan(s)/ drawing(s)  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).  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).  If Yes to any questions, please show details on your plans or drawings and state the reference number of any plans or drawing(s).  If Yes to any questions, please show details on your plans or drawings.  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details on your plans or drawing(s).  If Yes to any questions, please show details are please.  If Yes to any questions, please show details are please.  If Yes to any questions, please show details are please.  If Yes to any questions, please show details are please.  If Yes to any questions, please show details are please.  If Yes to any questions, please show details are please.  If Yes to any questions, please sh					
Address 2: Address 3: Town: PARHILIG HAM  County: Postcode (optional): Pes polication Advice Has assistance or prior advice been sought from the local authority about this application? 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 telk if the full contact details are not known, and then complete as much possible:  Officer name:    Date (DD MM YYYY): (must be pre-application advice received:   Will any trees or hedges need to be removed or prune if the full contact details are not known, and then complete as much possible:    Date (DD MM YYYY): (must be pre-application advice received:		proposed to or from the public highway?			
Address 2: Address 3:  Town:  FARHILIGHAM  County:  KENT  Postcode (optional):  As a sistance or prior advice been sought from the local authority about this application?  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:  Reference:    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?   Yes	Address 1: HIGH STREET	extinguishments and/or creation of public			
Address 3:  Town: FARHING HAM  County: KENT  Postcode (aptional):  6. Pre-application Advice  Has assistance or prior advice been sought from the local authority about this application?  Yes No  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:  Reference:  Will any trees or hedges on your own 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 to be removed or pruned in order to carry out your proposal?  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.  SEVENDAKS DISTRICT COUNCIL REC'D 11 NOV 2021	Address 2:	If Yes to any questions, please show details on your plans or			
County:	Address 3:				
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Has assistance or prior advice been sought from the local authority about this application?					
Has assistance or prior advice been sought from the local authority about this application?	6. Pre-application Advice	7. Trees and Hedges			
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:    Date (DD MM YYYY): (must be pre-application advice received:    SEVENOAKS DISTRICT COUNCIL   REC'D 11 NOV 2021	Has assistance or prior advice been sought from the local				
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Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:    The pre-application advice received:   The pre-application advice r	Reference:	Will any trees or hedges need			
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Yes, please describe:	A				
•					
eans related by birth	oyee / Member ole of decision-making that the process is open and or otherwise, closely enough that a fair minded and s blas on the part of the decision-maker in the local	d informed ob:	server, naving considered the facts	related t , would	o"
	statements apply to you and/or agent? [ ] Yes	<b>✓</b> No	With respect to the authority, I are (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member (d) related to an elected member (e)		
Yes, please provide d	etails of their name, role and how you are related to	o them.			_
0. Materials					
applicable, please stat	te what materials are to be used externally. Include	type, colour a	ind name for each material:	Τ σ	Г
	Existing (where applicable)	Proposed		Not applicable	Do Kn
	(where applicable)			app	
Walls	BRICKWORK	STOCK	FACING BRICKWORK		
Roof	H/A	CLEAR	GUASS		
Windows				1	E
Doors	N/A	FOLDING	OR SUPING DARK GREY COATED NIUM		
Boundary treatments (e.g. fences, walls)	Baick	STOCK	FACING BEICKWOLK		
		SE	VENOAKS DISTRICT COUN	GIL	
		RI	EC'D 1 1 NOV 2021		

Vehicle access and hard-standing	o be used externally. Include type, colour and name for each material:		
Lightlng			_
Others (please specify)		1 [	
Are you supplying additional information on If Yes, please state references for the plan(s)/o	submitted plan(s)/drawing(s)/design and access statement?  drawing(s)/design and access statement:	<b>V</b>	No

# 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: Date (DD/MM/YYYY): Or signed - Agent: 10/11/2021 **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 Licertify/ 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 **Date Notice Served Address** Or signed - Agent: Date (DD/MM/YYYY): Signed - Applicant:

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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				
<ul> <li>Neither Certificate A or B can be issued.</li> <li>All reasonable steps have been taken the land or building, or of a part of it.</li> <li>"owner" is a person with a freehold interest or "agricultural tenant" has the meaning given to the steps taken were:</li> </ul>	but I have/ the applicant has been u leasehold interest with at least 7 years	inable to do so. left to run.	or agricultural tenants** of	
Name of Owner / Agricultural Tenant	Address		Date Notice Served	
Notice of the application has been published (circulating in the area where the land is situ	l in the following newspaper ated):	On the following date than 21 days before th	(which must not be earlier ne date of the application):	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
Town and Country Planning (Development Certify) The applicant certifies that:  Certificate A cannot be issued for this All reasonable steps have been taken date of this application, was the owner have the applicant has been unable "owner" is a person with a freehold interest or I "agricultural tenant" has the meaning given in the steps taken were:	application to find out the names and addresses er* and/or agricultural tenant** of ar to do so. easehold interest with at least 7 years i	ngland) Order 2015 Certif s of everyone else who, on t ny part of the land to which left to run.	he day 21 days before the	
Notice of the application has been published (circulating in the area where the land is situa	in the following newspaper ted):	On the following date than 21 days before the	(which must not be earlier e date of the application):	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	

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12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the	information in support of your proposal. Failure to submit all			
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  The correct fee:				
completed and dated application form:  design and access sproposed works fall	statement if If within a The original and 3 copies* of the			
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:				
*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 the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the			
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):			
	(date cannot be pre-application)			
14. Applicant Contact Details	15. Agent Contact Details			
Telephone numbers	Telephone numbers			
Country code: National number: Extension number:	Country code: National number: Extension number:			
Country Cook. Mobile Harricki (optional)	Country code: Mobile number (optional):			
Country code:	Country code: Fax number (optional):			
Country code:   Country code: Fax number (optional):				
Email address (optional):				
16. Site Visit				
Can the site be seen from a public road, public footpath, bridleway 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:	Talanhana auminor			
Contact name:	Telephone number:			
Email address:				

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