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Application for a Lawful Development Certificate for an Existing use or operation or activity including those in breach of a planning condition. Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2015

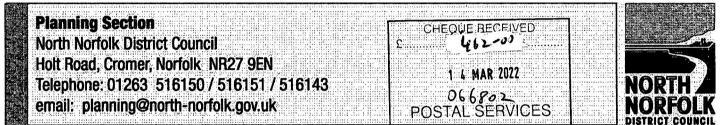
## **Privacy Notice**

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:



## 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. Applic              | ant Name and Address           | 2. Agent Name and Address                 |  |  |  |  |  |
|------------------------|--------------------------------|---|--|--|--|--|--|
| Title:                 | MR First name: FRANK           | Title: MR First name: RICHARD             |  |  |  |  |  |
| Last name:             | NICHOLS                        | Last name: HEWITT                         |  |  |  |  |  |
| Company<br>(optional): |                                | Company<br>(optional): HAVES + STORR      |  |  |  |  |  |
| Unit:                  | House number: 43 House suffix: | Unit: House Number: S7 - 63 House Suffix: |  |  |  |  |  |
| House<br>name:         |                                | House name:                               |  |  |  |  |  |
| Address 1:             | DAMGATE STREET                 | Address 1: STATION ROAD                   |  |  |  |  |  |
| Address 2:             |                                | Address 2:                                |  |  |  |  |  |
| Address 3:             |                                | Address 3:                                |  |  |  |  |  |
| Town                   | WYMONDHAM                      | Town: SHERINGHAM                          |  |  |  |  |  |
| County:                | NORFOLK                        | County: NORFOLK                           |  |  |  |  |  |
| Country:               | ENGLAND                        | Country: ENGLAND                          |  |  |  |  |  |
| Postcode:              | NRI8 OBG                       | Postcode: NRZ6 8RG                        |  |  |  |  |  |
|                        |                                | Version 2018.1                            |  |  |  |  |  |

|  |  | 1                |  |           | 1 1   |                                  |  |  |  |  |
|--|--|------------------|--|-----------|---|----------------------------------|--|--|--|--|
|  |  |                  |  |           |   |                                  |  |  |  |  |
|  |  |                  |  |           |   |                                  |  |  |  |  |
|  |  |                  |  |           |   |                                  |  |  |  |  |
|  |  |                  |  |           |   |                                  |  |  |  |  |
| Name   | Address  | Sta              | ate the nature<br>their interest<br>(if known)   | State who | ether they<br>n informed<br>application<br>No | lf No, please<br>explain why not |  |  |  |  |
| If No to all the above, p                              | ease give name and addre                             | ss of anyone you | u know who has an interest in the land:  |           |   |                                  |  |  |  |  |
|  |  |                  |  |           |   |                                  |  |  |  |  |
| If Yes to Lessee or Occu<br>Name                       | pier please give details of t                        |                  | Address No   |           |   |                                  |  |  |  |  |
|  | <b>_</b>   | essee: Yes       | No   |           | Occupier                                      |                                  |  |  |  |  |
| 5. Lawful Developn<br>Please state the applican        | nent Certificate - Inte<br>t's interest in the land: | rest In Land     |  | •         |   |                                  |  |  |  |  |
|  |  |                  |  |           |   |                                  |  |  |  |  |
| Description:   | ······································               | · · · · · ·      |  |           |   |                                  |  |  |  |  |
| Easting:   | Northing:  |                  |  |           |   |                                  |  |  |  |  |
| Description of location of<br>(must be completed if pe | r a grid reference.                                  |                  | (must be pre-application submission) Details of pre-application advice received?               |           |   |                                  |  |  |  |  |
| Postcode<br>(optional):                                |  |                  | Date (DD/MM/YYYY):   |           |   |                                  |  |  |  |  |
|  | ston REG<br>RFOLK                                    | <u>515</u>       | Reference:   |           |   |                                  |  |  |  |  |
| Address 3:   |  | ·····            | Officer name:  |           |   |                                  |  |  |  |  |
| Address 2:   |  |                  | Please tick if the full contact details are not known, and then complete as much as possible:  |           |   |                                  |  |  |  |  |
|  | RINGWO   | OD               | you were given. (This will help the authority to deal with this application more efficiently). |           |   |                                  |  |  |  |  |
|  | umber: si  | uffix:           | If Yes, please complete the following information about the advice                             |           |   |                                  |  |  |  |  |
|  |  | ouse             | Has assistance or prior advice been sought from the local authority about this application?    |           |   |                                  |  |  |  |  |
|  | ails   |                  | 4. Pre-ap  | -         |   |                                  |  |  |  |  |

## \* EXECUTOR OF DECEASED PROPERTY OWNER-

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| 6. Authority Employee / Member<br>It is an important principle of decision-making that the process is o<br>means related, by birth or otherwise, closely enough that a fair-min<br>conclude that there was bias on the part of the decision-maker in the | ded and informed obse  | erver, having considered the facts, would  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
| Do any of the following statements apply to you and/or agent?  | ]Yes 🔽 No  | With respect to the authority, I am:<br>(a) a member of staff<br>(b) an elected member<br>(c) related to a member of staff<br>(d) related to an elected member |  |  |  |  |  |  |
| If Yes, please provide details of their name, role and how you are re  | lated to them.   |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| 7. Description of Use, Building Works or Activity  | 8. Description o   | f Existing Use, Building Works or Activity   |  |  |  |  |  |  |
| Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):  |  | g site use(s) for which the certificate of<br>1 sought? Please fully describe each use and   |  |  |  |  |  |  |
| An existing use: Yes No  | state which part of  | the land the use relates to:   |  |  |  |  |  |  |
| Existing building works:   | RESIT  | SENTIAL  |  |  |  |  |  |  |
| An existing use, building work or activity in breach of a condition:   |  |  |  |  |  |  |  |  |
| Being a use, building works or activity which is still going on at the<br>date of this application   |  |  |  |  |  |  |  |  |
| If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to:                                   | 11   | х<br>-   |  |  |  |  |  |  |
| USE CONTRARY TO<br>POSSIBLE AGRICULTURAL   |  |  |  |  |  |  |  |  |
| RESTRICTION.   |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| 9. Grounds For Application For A Lawful Developme  |  |  |  |  |  |  |  |  |
| Please state under what grounds is the certificate sought (you must<br>The use began more than 10 years before the date of this appl   | [5] Projekterskie Bernskief sakalpernike in Kast (ink Killer Kashe ▲ 8 |  |  |  |  |  |  |  |
| The use, building works or activity in breach of condition bega  |  | efore the date of this application.  |  |  |  |  |  |  |
| The use began within the last 10 years, as a result of a change of use not requiring planning permission, and there has not been a   |  |  |  |  |  |  |  |  |
| change of use requiring planning permission in the last 10 years. The building works (for instance, building or engineering works) were substantially completed more than four years before the date of this application.                                |  |  |  |  |  |  |  |  |
| The use as a single dwelling house began more than four years before the date of this application.   |  |  |  |  |  |  |  |  |
| Other - please specify (this might include claims that the chan<br>from planning permission granted under the Act or by the Gen<br>If the certificate is sought on 'Other' grounds please give details:  | nge of use or building v<br>neral Permitted Develop                    | work was not development, or that it benefited oment Order).   |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |
| If applicable, please give the reference number of any existing plan<br>notice affecting the application site. Include its date and the num  | ning permission, lawfu<br>ber of any condition be                      | Il development certificate or enforcement<br>ing breached:   |  |  |  |  |  |  |
| Reference<br>Number: 4052163 Condition<br>Number:  |  | (YYY):<br>oplication submission) 08 · 05 · 1963  |  |  |  |  |  |  |
| Please state why a Lawful Development Certificate should be gran<br>PROPERTY HAS BEEN USE  | =D IN BR   | EACH OF POSSIBLE   |  |  |  |  |  |  |
| AGRICULTURAL RESTRICTION   | SINCE F  | AT LEAST 1984.   |  |  |  |  |  |  |

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|---|---------------------|
| 10. Information In Support Of A Lawful Development Certificate  |                     |
| When was the use or activity begun, or the C. 1984 (date must be pre-application submission) (DD/MM/YYYY)   |                     |
| In the case of an existing use or activity in breach of conditions has there been any interruption?   | V0                  |
| If Yes, please provide details of the dates, duration and any discontinuance of the development which is the subject of this application application is based on the claim that a use or activity has been ongoing for a period of years, please state exactly whe interruption occurred: | ation. If<br>en any |
|   |                     |
|   |                     |
|   |                     |
|   |                     |
| In the case of an existing use of land, has there been any material change<br>of use of the land since the start of the use for which a certificate is sought? Yes  | <br>Vo              |
| If Yes please provide details?  |                     |
|   |                     |
|   |                     |
|   |                     |
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| Does the application  | for a Ce           | ertifical | te relat | e to a i  |              | 5                 | Certificate (Continue the number of resident | •                  |         |           |          | ormation<br>Yes | No    |
|---|--------------------|-----------|----------|-----------|--------------|-------------------|--|--------------------|---------|-----------|----------|-----------------|-------|
| If Yes, please complete the following table:<br>Proposed Housing                                  |                    |           |          |           |              | Existing Housing  |  |                    |         |           |          |                 |       |
|   | Number of Bedrooms |           |          |           | Total        |                   | Number of Bedrooms                           |                    |         |           |          | Total           |       |
|   | 1                  | 2         | 3        | 4+        | Unknown      | Total             |  | 1                  | 2       | 3         | 4+       | Unknown         | Total |
| Market<br>Housing   |                    |           |          |           |              |                   | Market<br>Housing                            |                    |         |           |          |                 |       |
| Houses  |                    |           |          |           |              | а                 | Houses                                       |                    |         |           |          |                 | а     |
| Flats & Maisonettes   |                    |           |          |           |              | b                 | Flats & Maisonettes                          |                    |         |           |          |                 | b     |
| Live-Work Units   |                    |           |          |           | 1            | С                 | Live-Work Units                              |                    |         |           |          |                 | C,    |
| Cluster Flats   |                    |           |          |           |              | d                 | Cluster Flats                                |                    |         |           |          |                 | đ     |
| Sheltered Housing   |                    |           |          |           |              | e .               | Sheltered Housing                            |                    |         |           |          |                 | e     |
| Bedsit/Studios  |                    |           |          |           |              | t                 | Bedsit/Studios                               |                    |         |           |          |                 | f     |
| Unknown   |                    |           |          |           |              | g                 | Unknown                                      |                    |         |           |          |                 | g     |
| Market Hou  | sing To            | otal (a   | + b + c  | + d + e   | e + f + g) = | А                 | Market Hou                                   | sing T             | otal (a | + b + c   | + d + e  | + f + g) =      | E     |
| Social Rented<br>Housing  | 1                  | 2         | 3        | 4+        | Unknown      |                   | Social Rented<br>Housing                     | 1                  | 2       | 3         | 4+       | Unknown         |       |
| Houses  |                    |           |          | <u> </u>  |              | а                 | Houses                                       |                    |         |           |          |                 | 8     |
| Flats & Maisonettes   |                    | <u> </u>  |          |           |              | b                 | Flats & Maisonettes                          |                    |         | an a sana |          |                 | b     |
| Live-Work Units   |                    |           |          |           |              | c                 | Live-Work Units                              |                    |         |           |          |                 | <br>C |
| Cluster Flats   |                    |           |          |           |              | d                 | Cluster Flats                                | 2 10 100 - 10<br>2 |         |           |          | +               | d     |
| Sheltered Housing   |                    |           |          | 1         |              | e                 | Sheltered Housing                            |                    |         |           | <u> </u> |                 | <br>e |
| Bedsit/Studios  |                    |           |          | -         |              | f                 | Bedsit/Studios                               |                    |         |           |          |                 | f     |
| Unknown   |                    | ·         |          | 1         |              | g                 | Unknown                                      |                    |         |           |          |                 | g     |
| Social Rented House   | sing Ta            | otal (a   | + b + c  | + d + e   | (+f+q) =     | <del>у</del><br>В | Social Rented Hou                            | sing T             | otal (a | + b + c   | + d + e  | (+ f + q) =     | F     |
| Intermediate  | 1                  | 2         | 3        | 4+        | Unknown      |                   | Intermediate                                 | 1                  | 2       | 3         | 4+       | Unknown         |       |
| Housing<br>Houses   |                    | 8         |          |           |              | а                 | Housing<br>Houses                            |                    |         |           |          |                 | а     |
| Flats & Maisonettes   |                    |           |          |           |              | b                 | Flats & Maisonettes                          |                    |         |           |          |                 | b     |
| Live-Work Units   |                    |           |          |           |              | С                 | Live-Work Units                              |                    |         |           |          |                 | С     |
| Cluster Flats   |                    |           |          |           |              | d                 | Cluster Flats                                |                    |         |           |          |                 | đ     |
| Sheltered Housing   |                    |           |          | 1         |              | e                 | Sheltered Housing                            |                    |         |           |          |                 | e     |
| Bedsit/Studios  |                    |           |          |           |              | f                 | Bedsit/Studios                               |                    |         |           |          |                 | ſ     |
| Unknown   |                    |           | 1        | 1         |              | g                 | Unknown                                      |                    |         |           |          |                 | g     |
| Intermediate Hou  | sing To            | otal (a   | + b + c  | + d + e   | (+f+g) =     | С                 | Intermediate Hou                             | sing T             | otai (a | + b + c   | + d + e  | + f + g) =      | G     |
| Key Worker<br>Housing   | 1                  | 2         | 3        | 4+        | Unknown      |                   | Key Worker<br>Housing                        | 1                  | 2       | 3         | 4+       | Unknown         |       |
| Houses  |                    | 1         |          | 1         | 1            | а                 | Houses                                       |                    |         |           |          |                 | а     |
| Flats & Maisonettes   |                    | <u> </u>  | <b>†</b> | 1         | · · ·        | b                 | Flats & Maisonettes                          |                    |         |           |          |                 | b     |
| Live-Work Units   |                    | <u> </u>  |          | 1         |              | С                 | Live-Work Units                              |                    |         | 1         | t        |                 | C     |
| Cluster Flats   | -                  |           | <u> </u> | 1         | ļ,           | d                 | Cluster Flats                                |                    |         | 1         |          |                 | d     |
| Sheltered Housing   |                    |           |          |           |              | е                 | Sheltered Housing                            |                    |         |           | <u> </u> |                 | е     |
| Bedsit/Studios  |                    |           | <u> </u> | <u> </u>  |              | Ť                 | Bedsit/Studios                               |                    |         |           |          |                 | ſ     |
| Unknown   |                    | ··· · · · | <b>-</b> | †         |              | g                 | Unknown                                      |                    |         |           |          |                 | g     |
| Key Worker Hous   | ing To             | tal (a +  | b+c+     | - d + e - | + f + g) =   | D                 | Key Worker Hou                               | sing T             | otal (a | + b + c   | + d + e  | + f + g) =      | H     |
| Proposed Housing Grand Total $(A + B + C + D) =$ Existing Housing Grand Total $(E + F + G + H) =$ |                    |           |          |           |              |                   |  |                    |         |           |          |                 |       |
| TOTAL NET GAIN or   | LOSS               | of RES    | IDENT    |           | IITS (Propo  | sed Hou           | sing Grand Total - Exist                     | ting Ho            | ousing  | Grand     | Total    | ):              |       |

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| information required will result in your application being de the Local Planning Authority (LPA) has been submitted.   | sent all the<br>eemed inv  | information in support of your proposal. Failure to submit a valid. It will not be considered valid until all information requ  | uired by        |  |  |  |  |
|--|----------------------------|---|-----------------|--|--|--|--|
| The original and 3 copies* of a completed dated application form:  | -                          | The original and 3 copies* of such evidence verifying the information included in the application as you can provide:   | -               |  |  |  |  |
| 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 correct fee:  |                 |  |  |  |  |
| *National legislation specifies that the applicant must provi<br>total of four copies), unless the application is submitted ele<br>LPAs may also accept supporting documents in electronic f<br>You can check your LPA's website for information or contac | ctronically<br>format by p | ginal plus three copies of the form and supporting documen<br>y or, the LPA indicate that a smaller number of copies is requi-<br>post (for example, on a CD, DVD or USB memory stick).<br>nning department to discuss these options. | ts (a<br>red.   |  |  |  |  |
| 12. Declaration  | · · ·                      |   |                 |  |  |  |  |
|  |                            | in this form and the accompanying plans/drawings and addi<br>facts stated are true and accurate and any opinions given are  |                 |  |  |  |  |
| Signed - Applicant   |                            | Or signed - Agent   |                 |  |  |  |  |
|  |                            |   |                 |  |  |  |  |
|  |                            | L <u></u>   |                 |  |  |  |  |
| Date (DD/MM/YYYY):   |                            | 7   |                 |  |  |  |  |
| 09 03 2022 (date cannot be pre-application su  | ubmission)                 | )   |                 |  |  |  |  |
| WARNING:<br>The amended section 194 of the 1990 Act provides that it is<br>information with intent to deceive. Section 193(7) enables<br>result of such false or misleading information.   | s an offenc<br>the author  | e to furnish false or misleading information or to withhold m<br>rity to revoke, at any time, a certificate they may have issued  | aterial<br>as a |  |  |  |  |
| 13. Applicant Contact Details  |                            | 14. Agent Contact Details   |                 |  |  |  |  |
| Telephone numbers  |                            | Telephone numbers   |                 |  |  |  |  |
| ĒX   | tension<br>Imber:          | EX  | tension         |  |  |  |  |
|  |                            | 01263 825959  |                 |  |  |  |  |
| Country code: Mobile number (optional):  |                            | Country code: Mobile number (optional):   |                 |  |  |  |  |
|  |                            |   |                 |  |  |  |  |
| Country code: Fax number (optional):   |                            | Country code: Fax number (optional):  |                 |  |  |  |  |
|  |                            | 01263 824282  |                 |  |  |  |  |
| Émail address (optional):  |                            | Email address (optional):   |                 |  |  |  |  |
|  |                            |   | j               |  |  |  |  |
|  |                            |   |                 |  |  |  |  |
| <b>15. Site Visit</b><br>Can the site be seen from a public road, public footpath, br  | diawayor                   | rothor public land?   |                 |  |  |  |  |
| If the planning authority needs to make an appointment to  | carry                      |   | from the        |  |  |  |  |
| out a site visit, whom should they contact? (Please select on  | ly one)                    | Agent Applicant Other (if different agent/applicant's   | details)        |  |  |  |  |
| If Other has been selected, please provide:<br>Contact name: Telephone number:   |                            |   |                 |  |  |  |  |
|  |                            |   |                 |  |  |  |  |
| Email address:   |                            |   |                 |  |  |  |  |
|  |                            |   |                 |  |  |  |  |