



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:



Development Management Service
Wellingborough Office
Swanspool House
Doddington Road
Wellingborough NN8 1BP
Tel: 01933 231906
www.northnorthants.gov.uk

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. Applicant Name and Address		
Title:	MR EMRS First name: 5	Titl
Last name:	WARD	Las
Company (optional):		Cor (op
Unit:	House number: House suffix:	Un
House name:		Ho nar
Address 1:	MAIN STREET	Ad
Address 2:		Ad
Address 3:		Ad
Town:	LITTLE HARROWDEN	To
County:		Co
Country:		Co
Postcode:	NING 58A	Pos

2. Agent Name and Address		
Title:	MR. First name: MARTYY	
Last name:	RICE	
Company (optional):		
Unit:	House number: 27 House suffix:	
House name:		
Address 1:	HEATH RISE	
Address 2:		
Address 3:		
Town:	WELLINGBOROUGH	
County:	NORTHANTS	
Country:	UK	
Postcode:	MN850N	

Please describe the proposed works:				
FIRST FROOR SIDE	EXTENSION TO			
Has the work already started? Yes Yes				
If Yes, please state when the work was started (DD/MM/YYYY): Has the work already been completed?	(date must be pre-application submission			
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission			
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Wa			
Please provide the full postal address of the application site. Unit: House number: /// House suffix: House name: Address 1: MAIN STREET Address 2: Address 3: Town: LITTLE HARROUDEN County: NORTHANTS Postcode (optional): M95BA 6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No f 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	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 adjoining properties which are within falling distance of your proposed development? Yes No If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:			
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? 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.			

Will the proposed w	orks affect existing car parking arrangements? [Yes No		
				
t is an important prir neans related, by bir onclude that there v	ployee / Member nciple of decision-making that the process is open a th or otherwise, closely enough that a fair minded was blas on the part of the decision-maker in the lo	and transparent. For the purposes of this question and informed observer, having considered the fac	n, "relate ets, wou	ed to"
o any of the followi	ng statements apply to you and/or agent? 🔲 Yes	With respect to the authority, I (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member		
Yes, please provide	details of their name, role and how you are related	to them.	El	
). Materials				
ipplicable, please sta	ate what materials are to be used externally. Includ	de type, colour and name for each material:		
	Existing (where applicable)	Proposed	Not applicable	Don't Know
alls	FACING BRICK	MATCHING FACING BRICKS		
oof	LONCRET INTERLOCKING	MATCHING CONCRETE		
ndows	UPVC	MATCHING UPUC DOUBLE GLAZED		
OFS				
Indary treatments . fences, walls)				

Vehicle access and hard-standing	state what materials are to be used externally. Include type, colour and name for each material:	
Lighting		
Others (please specify)		
	itional information on submitted plan(s)/drawing(s)/design and access statement? Yes ences for the plan(s)/drawing(s)/design and access statement: Yes PLAND SITE PLANS H 5 /3/43/22/1 & /3/43/22/2] 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 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 spart of, an agricultural holding.

Or signed - Agent:

Date (DD/MM/VVVV)

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.

	- 11	
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application relates. * "owner" is a person with a freehold inter * "agricultural tenant" has the meaning of	CERTIFICATE OF OWNERSHIP - CERTIFICATE Bevelopment Management Procedure) (England) Orde ave/the applicant has given the requisite notice to every ion, was the owner* and/or agricultural tenant** of any est or leasehold interest with at least 7 years left to rungiven in section 65(8) of the Town and Country Planning Act	r 2015 Certificate under Article 14 one else (as listed below) who, on the day part of the land or building to which this
Name of Owner / Agricultural Tenant	Address	Date Notice Served
iigned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

All reasonable steps have been the land or building, or of a part	CERTIFICATE OF OWNERSHIP - Cevelopment Management Procedure) elissued for this application taken to find out the names and address	ERTIFICATE C (England) Order 2015 Certific (ses of the other owners* and/or a unable to do so.	
Name of Owner / Agricultural Tenant	Addi		
	Addres	is	Date Notice Served
Notice of the application has been publis	shool in the fall of		
(circulating in the area where the land is	situated):	On the following date (whi than 21 days before the da	ich must not be earlier te of the application):
Signed - Applicant:			
orgined Applicant.	Or signed - Agent:		Date (DD/MM/YYYY):
All reasonable steps have been taken	en to find out the names and addresses /ner* and/or agricultural tenant** of an le to do so.	ngland) Order 2015 Certificate of everyone else who, on the da y part of the land to which this a	
itice of the application has been publishe rculating in the area where the land is situ	d in the following newspaper lated):	On the following date (which than 21 days before the date	must not be earlier
		a de la composition de la comp	or the application):
ned - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):

Please read the following checklist to make sure you have set in formation required will result in your application being deep the Local Planning Authority (LPA) has been submitted.	klist ent all the information in support of your proposal. Failure to submit all emed invalid. It will not be considered valid until all information required by
The original and 3 copies* of a	al and 3 copies* of a The correct fee:
The original and 3 copies* of a plan which dentifies 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:	works fall within a on area or itage Site, or relate to a ding: The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):
	le the original plus three copies of the form and supporting documents (a ronically or, the LPA indicate that a smaller number of copies is required. mat by post (for example, on a CD, DVD or USB memory stick). their planning department to discuss these options.
13. Declaration	
/we hereby apply for planning and a	ped in this form and the accompanying plans/drawings and additional lge, any facts stated are true and accurate and any opinions given are the
NUMBER Applicant.	
Or signed - Applicant:	Agent: Date (DD/MM/YYYY):
	10/22/2: (date cannot be
14.0	28/03/2/22 (date cannot be pre-application)
14. Applicant Contact Details	15. Agent Contact Details
Felephone numbers	1.1
	Telephone numbers
Country code: National number: Extens number	
Country code: Mobile number (optional):	
	Country code: Mobile number (optional):
Country code: Fax number (optional):	Country code: Fax number (optional):
mail address (optional):	Email address (optional):
	The section is a s
6. Site Visit	
in the site be seen from a public road, public footpath, bridlew	VAV OF Other public lands
the planning authority needs to make an appointment to carry it a site visit, whom should they contact? (Please select only one	y
Other has been selected, please provide: ontact name:	Agent Applicant Other (if different from the agent/applicant's details)
Sittact Harrie.	Telephone number:
nail address:	