

10. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	RENDERED. COLOUR NOT CHOSEN YET, BUT WILL MATCH THE EXISTING BUILDING.	RENDERED	<input type="checkbox"/>	<input type="checkbox"/>
Roof	SLATE	SLATE	<input type="checkbox"/>	<input type="checkbox"/>
Windows	SINGLE GLAZED TIMBER.	DOUBLE GLAZED UPVC.	<input type="checkbox"/>	<input type="checkbox"/>
Doors	SINGLE GLAZED TIMBER.	DOUBLE GLAZED COMPOSITE UPVC.	<input type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard-standing			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lighting	SECURITY LIGHT.	SECURITY LIGHT.	<input type="checkbox"/>	<input type="checkbox"/>
Others (please specify)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

Yes

No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement: