



Householder Application for Planning Permission for works or extension to a dwelling

Council	Mid Suffolk District Council
Applicant Name and Address	
Title	Mr
First name	Mark
Last name	Marconi
Company	
Property name/number	Wheelwrights
Address line 1	Church Street
Address line 2	
Town/Village	Worlingworth
County	Suffolk
Country	
Postcode	IP13 7NT
Is an agent being used	Yes
Do you believe you are exempt from the application fee?	No, standard fees will apply
Planning application reference number for resubmission	
Agent Name and Address	
Title	Mr
First name	Tom
Last name	Mckechnie
Company	Gorniak & Mckechnie Ltd Architects and Designers
Property name/number	Studio 37
Address line 1	Church Street
Address line 2	

Town/Village	Eye
County	Suffolk
Country	United Kingdom
Postcode	IP23 7BD

Description of Proposed Works

Please describe the proposed works	Demolition of 2No existing single storey flat roof extensions to rear and replacing with 1No two storey extension and 1No single storey extension to rear of dwelling. Cladding part existing rendered walls with weatherboarding
Has the work already started?	No
If Yes, please state when the work was started	
Has the work already been completed?	No
If Yes, please state when the work was completed	

Site Address Details

Property name/number	WheelWrights
Address line 1	Church street
Address line 2	
Town/Village	Worlingworth
County	Suffolk
Postcode	IP13 7NT

Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway?	No
Is a new or altered pedestrian access proposed to or from the public highway	No
Do the proposals require any diversions, extinguishments and/or creation of public rights of way?	No
If Yes to any of questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s)	

Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?	No
Officer name	
Pre-application reference	
Date	
Details of pre-application advice received	

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?	No
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?	No
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)/drawings(s) and indicate the scale.	

Parking

Will the proposed works affect existing car parking arrangements	No
If Yes, please describe	

Authority Employee / Member

Do any of the listed statements apply to you and/or agent?	No
If Yes, please provide details of their name, role and how you are related to them.	

Materials

Walls	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	Painted render

Proposed	Painted weatherboarding on part existing rendered walls. Facing soft red bricks to ground floor extension, natural larch rain screen cladding to first floor extension
Roof	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	Soft red clay pan tiles
Proposed	New single storey lean-to be slate Two storey extension to be in anthracite coloured standing seam steel roofing
Windows	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	Purpose made in softwood painted
Proposed	Powder coated aluminium to two storey extension. Purpose made in oak to single storey lean-to extension
Doors	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	Purpose made in softwood painted
Proposed	Powder coated aluminium. Purpose made in oak
Boundary treatments (e.g. fences, walls)	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Vehicle access and hard-standing	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Lighting	
Not applicable / Dont know	Not applicable

Existing (where applicable)	
Proposed	
Others (please specify)	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?	Yes
If Yes, please state references for the plan(s)/drawing(s)/design and access statement	1881:300, 301
Ownership Certificates and Agricultural Land Declaration	
Please select an ownership certificate and agricultural land declaration statement that applies to you	Certificate A
CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
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	
Signed Applicant	
Or signed - Agent	Tom Mckechnie
Date	29/06/2022
Declaration	
<input checked="" type="checkbox"/> I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.	
Signed Applicant	
Or signed - Agent	Tom Mckechnie
Date	29/06/2022
Applicant Contact Details	
Telephone number	

Extension number	
Mobile telephone number	
Fax number	
Email address	
Agent Contact Details	
Telephone number	
Extension number	
Mobile telephone number	
Fax number	
Email address	
Site Visit	
Can the site be seen from a public road, public footpath, bridleway or other public land?	Yes
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?	Applicant
Contact name	
Telephone number	
Email address	
Payment	
Are you the applicant or are you an agent working on behalf of the applicant?	
Who will pay for this application?	
Email address (this is the address the payment receipt will be sent to)	
Payment Total	
Payment Receipt Number	
Date & Time	