Planning Services

South Norfolk House, Swan Lane, Long Stratton, Norwich NR15 2XE

Email: planning@s-norfolk.gov.uk

Tel: 01508 533845 Fax: 01508 533625

www.south-norfolk.gov.uk



2. Agent Name and Address

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

Applicant Name and Address

Title:

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Company (optional): Unit: House number: House suffix: House name: House name:
House House House
House The Cottons House
name.
Address 1: Mill Green. Address 1: PLasset Drive
Address 2: Address 2:
Address 3: Address 3:
Town: Borston Town: Attleborough
County: NOFEIK County: NOFEIK
Country: England. Country: England
Postcode: IPZZ 5TG Postcode: NRTZNU
3. Description of Proposed Works
Please describe the proposed works:
Papased garden room, side
Kitchen extension and w.c. to
REFUND.

A print the second of the seco	
Description of Proposed Works (continued)	
Has the work already started?	*
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
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	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or altered vehicle access
Unit: House House suffix:	proposed to or from the public highway? Yes No
House name: The cottoge	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
Address 1: Mill Green	Do the proposals require any diversions, extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:	drawing(s):
Town: Buston	
County: County	
Postcode (optional): P22516	
6. Pre-application Advice	7. Trees and Hedges
Has assistance or prior advice been sought from the local	Are there any trees or hedges on your own
authority about this application? Yes No	property or on adjoining properties which
If Yes, please complete the following information about the advice	are within falling distance of your proposed development?
you were given. (This will help the authority to deal with this	If Yes, please mark their position on a scaled
application more efficiently). Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:
known, and then complete as much possible:	
Officer name:	
Peference:	Will any trees or hedges need
	to be removed or pruned in
Date (DD MM YYYY): (must be pre-application submission)	order to carry out your proposal? Yes No
Details of the pre-application advice received:	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.
8. Parking	9. Authority Employee / Member
Will the proposed works affect	With respect to the Authority, I am:
existing car parking arrangements? Yes No	(a) a member of staff (b) an elected member statements apply to you?
If Yes, please describe:	(c) related to a member of staff Yes No
- ,= 8- K	(d) related to an elected member
	If Yes, please provide details of the name, relationship and role
J 1	11

	Existing		- 342	
	(where applicable)	Proposed	Not applicable	Don Kno
Walls	Render I brick Plinth	Render/brick Plinth to make Existing.		
Poof	Rooftiles	Restiles to match existing		
Vindows	W000	Mood to match existing		
Doors	WD	Wood to		
oundary treatments e.g. fences, walls)	Timber Ence	Timber ferce		
ehicle access and ard-standing	shingle	shingle		
ghting			V	
thers lease specify)				
	ional information on submitted plan(s)/drawing(s) ences for the plan(s)/drawing(s)/design and access] No
DZIWI	NHIZZIBII.	Design and	5	*

One Certificate A, B, C, or D, must b	e completed, together with the Agricultural Holdings Certificate wit	h thisapplication form 4
Town and Country Planning (Descritive) The applicant certifies that on towner (owner is a person with a freehold which the application relates.	evelopment Management Procedure) (England) Order 2010 Certification and Service and Servic	te under Article 12 the applicant was the le land or building to
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
*	MINARMO	25/05/22
Teertify/ The applicant certifies that I ha 21 days before the date of this application left to run) of any part of the land or build	CERTIFICATE OF OWNERSHIP—CERTIFICATE B evelopment Management Procedure) (England) Order 2010 Certificative/the applicant has given the requisite notice to everyone else (as listed the procedure) (as listed the procedure) (as listed the procedure) of the procedure of the procedu	id below) who, on the day interest with at least 7 years
Name of Owner	Address	Date Notice Served
* * *		y 8. a
. 1		
Sgned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
- Б	or agrico / goriti	Date (DD) (VIII)
Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so. The steps taken were:	taken to find out the names and addresses of the other owners (owner is at least 7 years left to run) of the land or building, or of a part of it, but I h	a person with a freehold ave/ the applicant has
1 12		
Name of Owner	Address	Date Notice Served
		THE STATE OF
E		a gen
1 * 1		
Notice of the application has been publi circulating in the area where the land is	shed in the following newspaper On the following date (which situated): On the following date (which is the following date):	h must not be earlier e of the application):
	.: .	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

1. Ownership Certificates

Town and Country Pl	ates (continue	EDITERON OF OWNERDS UP	RTIFICATED	
Cortificate A connect t	balancade	pment Management Procedure) (I application to find out the names and addresse or (owner is a person with a freehold in oplication relates, but I have/ the ap		0.0
The steps taken were:		The second secon	prison in the order of the order of	o do so.
1.7				
Notice of the application has (circulating in the area where	been published in the land is situate	n the following newspaper ed):	On the following dat than 21 days before	e (which must not be earlie he date of the application):
Fe.				9
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YY
12. Agricultural Land De				
Town and Country Plan (A) None of the land to which Signed - Applicant:	ining (Developm Agricultural Li the application re	AGRICULTURAL LAND DECLARA- nent Management Procedure) (En and Declaration - You Must Comple- elates is, or is part of, an agricultural Or signed - Agent:	gland) Order 20 10 Certi ete Ether A or B	ficate under Article 12 Date (DD/MM/YY)
	4	mint	SAY	Date (DD/MIN/ YY
(D) 11- 17- 11- 11- 11- 11- 11- 11- 11- 11-		ION	AMA	DISID
		notice to every person other than t of an agricultural holding on all or	nyself/ the applicant who part of the land to which	, on the day 21 days this application relates,
Name of Tenant.	64	Address	-/: Y	Date Notice Serve
. 1			*	
		X -1 -2 -		
Igned - Applicant:		Or signed - Agents		
Igned - Applicant:		Or signed - Agent:		Date (DD/MM/YY)
Sgned - Applicant:		Or signed - Agent:		Date (DD/MM/YY)
	Paguiroman			Date (DD/MM/YY)
3. Planning Application ease read the following checkliformation required will result in e Local Planning Authority has	ist to make sure y	ts - Checklist you have sent all the information in n being deemed invalid. It will not	support of your proposal be considered valid until	
3. Planning Application ease read the following checkliformation required will result in e Local Planning Authority has be original and 3 copies of a mpleted and dated application are original and 3 copies of a plan e original and 3 copies of a plan e original and 3 copies of a plan e	ist to make sure y n your application been submitted. n form:	ts - Checklist You have sent all the information in a being deemed invalid. It will not the original and 3 copies of a design and access statement if proposed works fall within a	The correct fee:	Failure to submit all all information required by
3. Planning Application ease read the following checkliformation required will result in e Local Planning Authority has ne original and 3 copies of a mpleted and dated application	ist to make sure y n your application s been submitted. n form: an which application ale rth:	ts - Checklist you have sent all the information in n being deemed invalid. It will not The original and 3 copies of a design and access statement if	The correct fee: The original and completed, date	all information required by

4. Declaration I/we hereby apply for planning permission/consent as described in tinformation. Sgned - Applicant: Or signed - Agent	
Telephone numbers Country code Country code Country code Country code: Fax number (optional):	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional):
	niaelivirellayaha.co.ok
17. Site Visit Can the site be seen from a public road, public footpath, bridleway o If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Pease select only one) If Other has been selected, please provide: Contact name:	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
Email address:	