

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	Jamie
Last name	French
Company	
Property name/number	10
Address line 1	Drinkstone Road
Address line 2	
Town/Village	Gedding
County	Suffolk
Country	UK
Postcode	IP30 0QB
Is an agent being used	No
Do you believe you are exempt from the application fee?	No, standard fees will apply
Planning application reference number for resubmission	
Description of Proposed Works	
Please describe the proposed works	Proposed timber framed double Garage
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	10

Address line 1	Drinkstone Road	
Address line 2		
Town/Village	Gedding	
County	Suffolk	
Postcode	IP30 0QB	
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	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)	
Proposed	Feather edge timber boarding in natural colour
Roof	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Man made fibre concrete grey slate roofing tiles
Windows	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Timber framed rear double glazed window in black finish
Doors	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	

Proposed	Tongue and groove double garage doors in black finish Timber rear door and frame frame in black finish
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	Details to be provided below
Existing (where applicable)	Existing gravel drive to be re- gravelled
Proposed	Gravel drive to be extended to front of garage doors
Lighting	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	New armoured underground cable to be extended to garage from house for lighting and power point
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	Location Plan No3 Block Plan No 2 Plans and Elevations Drawing No1
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	Jamie French	
Or signed - Agent		
Date	31/08/2022	
Declaration		
✓ 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	Jamie French	
Or signed - Agent		
Date	31/08/2022	
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	