



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

Council	Mid Suffolk District Council
<b>Applicant Name and Address</b>	
Title	Mr & Ms
First name	Mr A Brown
Last name	Ms L Hall
Company	
Property name/number	5
Address line 1	Little Box Meadow
Address line 2	Little Blakenham
Town/Village	Ipswich
County	Suffolk
Country	
Postcode	IP8 4LT
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	
<b>Agent Name and Address</b>	
Title	Mr
First name	Adrian
Last name	Ruffell
Company	RGP Building Design
Property name/number	3 Moat View
Address line 1	Lower Farm Road
Address line 2	Ringshall

Town/Village	Stowmarket
County	Suffolk
Country	
Postcode	IP14 2JE

### Description of Proposed Works

Please describe the proposed works	Erection Of Two Storey Side Extension & Alterations To Existing Rear Single Storey Garden Room Including Raised Roof.
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	5
Address line 1	Little Box Meadow
Address line 2	Little Blakenham
Town/Village	Ipswich
County	Suffolk
Postcode	IP8 4LT

### 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?	Yes
If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings	Refer To Existing Block Plan (Drawing PL05).
Will any trees or hedges need to be removed or pruned in order to carry out your proposal?	Yes
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.	Refer To Proposed Block Plan (Drawing PL05).

### 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	Red Facing Brickwork and Artificial Horizontal Cladding

Roof	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	Extension - Roof Tiles To Match Existing In Colour In Profile Garden Room - Replacement Guardian Lightweight Roofing System (Esprit Tiles With Colour To Match Existing).
Windows	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	UPVC or Aluminium Double Glazed.
Doors	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	
Proposed	UPVC or Aluminium Double Glazed.
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	Details to be provided below
Existing (where applicable)	

Proposed	UPVC Fascias, Bargeboards, Soffits and Rainwater Goods.	
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?	No	
If Yes, please state references for the plan(s)/drawing(s)/design and access statement		
<b>Ownership Certificates and Agricultural Land Declaration</b>		
Please select an ownership certificate and agricultural land declaration statement that applies to you	Certificate B	
<b>CERTIFICATE OF OWNERSHIP - CERTIFICATE B</b>		
I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner and/or agricultural tenant of any part of the land or building to which this application relates		
<b>Owner / Agricultural Tenant details</b>		
<b>Name of Owner / Agricultural Tenant</b>	<b>Address</b>	<b>Date Notice Served</b>
Babergh & Mid Suffolk District Councils	Endeavour House, 8 Russell Road, Ipswich, IP1 2BX	08/09/2022
Signed Applicant		
Or signed - Agent	Adrian Ruffell	
Date	09/09/2022	
<b>Declaration</b>		
<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	Adrian Ruffell	
Date	09/09/2022	
<b>Applicant Contact Details</b>		
Telephone number	[REDACTED]	

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?	No
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?	Agent
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	