

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	Adrian	
Last name	Francis	
Company		
Property name/number	Cornfields	
Address line 1	Fiske Pightle	
Address line 2	Willisham Hall Rd	
Town/Village	Willisham	
County	Suffolk	
Country		
Postcode	IP8 4SN	
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	Peter	
Last name	Keen	
Company		
Property name/number	67	
Address line 1	Dobbs Lane	
Address line 2		

Town/Village	Kesgrave	
County	Suffolk	
Country	United Kingdom	
Postcode	IP5 2QE	
Description of Proposed Works		
Please describe the proposed works	Second storey rear extension	
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	Cornfields	
Address line 1	Fiske Pightle	
Address line 2	Willisham Hall Rd	
Town/Village	Willisham	
County	Suffolk	
Postcode	IP8 4SN	
Pedestrian and Vehicle Access, Roads and R	ights 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	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)	Red Brick	
Proposed	Red Brick	
Roof		
Not applicable / Dont know	Details to be provided below	
Existing (where applicable)	Grey Grovebury	

Proposed	Grey Grovebury
Windows	
Not applicable / Dont know	Details to be provided below
Existing (where applicable)	Brown Upvc
Proposed	Brown upvc
Doors	
Not applicable / Dont know	Not applicable
Existing (where applicable)	
Proposed	
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	Attached Plans

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	Peter Keen	
Date	04/10/2022	
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		
Or signed - Agent	Peter Keen	
Date		
Date	04/10/2022	
Applicant Contact Details	04/10/2022	
	04/10/2022	
Applicant Contact Details	04/10/2022	
Applicant Contact Details Telephone number	04/10/2022	
Applicant Contact Details Telephone number Extension number	04/10/2022	
Applicant Contact Details Telephone number Extension number Mobile telephone number	04/10/2022	
Applicant Contact Details Telephone number Extension number Mobile telephone number Fax number	04/10/2022	
Applicant Contact Details Telephone number Extension number Mobile telephone number Fax number Email address	04/10/2022	
Applicant Contact Details Telephone number Extension number Mobile telephone number Fax number Email address Agent Contact Details	04/10/2022	
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Applicant Contact Details Telephone number Extension number Mobile telephone number Fax number Email address Agent Contact Details Telephone number Extension number	04/10/2022	
Applicant Contact Details Telephone number Extension number Mobile telephone number Fax number Email address Agent Contact Details Telephone number Extension number Mobile telephone number	04/10/2022	

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?	Agent (if one is being used)
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	