

Mid Suffolk District Council Planning Services
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www.midsuffolk.gov.uk

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

1. Applic	ant Name and Address	2. Agent Name and Address					
Title:	MRE First name: K	Title:	First name:				
Last name:	WEBBER	Last name:					
Company (optional):		Company (optional):)5				
Unit:	House number: House suffix:		ouse House umber: suffix:				
House name:	OLD SCHOOL HOUSE	House name:	2				
Address 1:	CHURCH ROYAD	Address 1: BA	MISH HUB				
Address 2:		Address 2:					
Address 3:		Address 3:					
Town:	ASHBOCK ING	Town: IPSW	CH				
County:		County:					
Country:		Country:					
Postcode:	196 9LG	Postcode: IP3 9	RY				
3. Descri	iption of Proposed Works						
Please describe the proposed works:							
PROPOSED SINGLE STOREY REAR EXTENSION							
AND ALTERATIONS INCUDING FIRST FLOOR							
AND ALTERATIONS INCUDING FIRST FLOOR ROOF TERRACE							

3. Description of Proposed Works (continued)	
Has the work already started?	
f Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission
-las the work already been completed? Yes No	
f Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details Please provide the full postal address of the application site. Unit: House House suffix: House name: Address 1: DLD SCHOOL HOUSE Address 2: CHURCH ROAD Address 3: ASHBOCKING Town: County:	S. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed to or from the public highway? Yes No Is a new or altered pedestrian access proposed to or from the public highway? Yes No Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes No If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s):
Postcode (optional): 186 9 GG	
-las assistance or prior advice been sought from the local authority about this application? Yes No f Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not known, and then complete as much possible: Officer name: ELECT CKASCACC Reference:	7. 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? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
DC/23/02431 Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received: C-mail explaining to Submit new form with ecdogical report to keep previous application running.	Will any trees or hedges need to be removed or pruned in order to carry out your proposal? 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 Will the proposed works affect existing car parking arrangements? Yes No If Yes, please describe:	9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member If Yes, please provide details of the name, relationship and role

10. Materials f applicable, please state what materials are to be used externally. Include type, colour and name for each material: Not applicable Don't Existing Proposed Know (where applicable) RANDER Walls FELT FLAT ROCK Roof Windows Doors **Boundary treatments** (e.g. fences, walls) Vehicle access and hard-standing Lighting

Vehicle access and hard-standing

Lighting

Others (please specify)

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

22/12/0040, 22/4/12/0041

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11. Ownership Certificates

One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form

CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates. Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: 06/2023 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 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 (owner is a person with a freehold interest or leasehold interest with at least 7 year. left to run) of any part of the land or building to which this application relates. **Date Notice Served** Name of Owner Address Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. The steps taken were: **Date Notice Served Address** Name of Owner Notice of the application has been published in the following newspaper On the following date (which must not be earlier than 21 days before the date of the application): (circulating in the area where the land is situated): Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant:

 I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the control of the con	CERTIFICATE OF OWNERSHIP - CERTIFICATE OWNERSHIP -	gland) Order 2010 Certificate of everyone else who, on the da wrest or leasehold interest with at	y 21 days before the least 7 years left to run)
Notice of the application has been publis (circulating in the area where the land is s	hed in the following newspaper ituated):	On the following date (which than 21 days before the date	n must not be earlier e of the application):
Signed - Applicant:	Or signed - Agent:	Or signed - Agent:	
Agricult	AGRICULTURAL LAND DECLARAT elopment Management Procedure) (Engl cural Land Declaration - You Must Complete	land) Order 2010 Certificate (e Either A or B	under Article 12
	tion relates is, or is part of, an agricultural h Or signed - Agent:	olding.	Date (DD/MM/YYYY
Signed - Applicant:	Or signed - Agent.		27/96/2023
(B) I have/ The applicant has given the rec before the date of this application, was a as listed below:	quisite notice to every person other than m tenant of an agricultural holding on all or p	yself/ the applicant who, on the part of the land to which this ap	e day 21 days polication relates,
Name of Tenant	Address		Date Notice Served
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY
information required will result in your ap the Local Planning Authority has been sub The original and 3 copies of a completed and dated application form: The original and 3 copies of a plan which identifies the land to which the applicatio relates drawn to an identified scale and showing the direction of North: The original and 3 copies of other plans	te sure you have sent all the information in plication being deemed invalid. It will not omitted. The original and 3 copies of a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building:	The correct fee: The original and 3 corporated on the completed, dated Ow Certificate (A, B, C or I	pies of the // - as applicable):
and drawings or information necessary to describe the subject of the application:	1	completed, dated Art (Agricultural Holding	

11. Ownership Certificates (continued)

/we hereby apply for planning permission/consonformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.	ent as described in th /our knowledge, any	his form and the accompanying plans/drawings and additional r facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		27/06/2023 (date cannot be pre-application
15. Applicant Contact Details		16. Agent Contact Details
Telephone numbers		Telephone numbers
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Country code: National number: O(473 276/47 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Info abds. org. VIC
17. Site Visit		,
Can the site be seen from a public road, public fo	ootpath, bridleway or	r other public land? Yes No
f the planning authority needs to make an appoout a site visit, whom should they contact? (Please	intment to carry se select only one)	Applicant Other (if different from the agent/applicant's details)
f Other has been selected, please provide:		
Contact name:		Telephone number:

14. Declaration

Email address: