

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

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

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)'.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to Inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



EAST CAMBRIDGESHIRE DISTRICT COUNCIL

The Grange, Nutholt Lane, Ely, Cambridgeshire, CB7 4EE
Telephone: 01353 665555
www.eastcambs.gov.uk

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

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

| 1. Applicant Name and Address | 2. Agent Name and Address |
|-------------------------------|--|
| Title: MC+ML\$ First name: M | Title: MR First name: GREG |
| Last name: DAVIS | Last name: SABERTON |
| Company (optional): | Company (optional): GREG SABERTON DESIGN |
| Unit: House House suffix: | Unit: House number; House suffix: |
| House name: 6 Agent | House name: Tom's HOLE BARN |
| Address 1: | Address 1: BRANCH BANK |
| Address 2: | Address 2: Paickwillow |
| Address 3: | Address 3: |
| Town: | Town: ELY |
| County: | County: CAMBS |
| Country: | Country: |
| Postcode: | Postcode: C37 4UR |

| | iption of Proposed Works | |
|--|---|---|
| Please des | Conservatory conver | rsion a inversal allerations |
| If Yes, pleas | rk already started? Yes No se state when the work was started (DD/MM/YYYY): rk already been completed? Yes No | (date must be pre-application submission |
| If Yes, pleas | se state when the work was completed (DD/MM/YYYY): | (date must be pre-application submission) |
| | WITCHFORD ELY CAMBS | 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): |
| Has assistant authority at lif Yes, pleas you were gapplication Please tick known, and Officer nar | | 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: |
| 0 (8) | Date (DD MM YYYY): re-application submission) he pre-application advice received: | 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. |

| 3. Parking Will the proposed works If Yes, please describe: | affect existing car parking arrangements? | Yes No | | | |
|---|---|------------------------|--|-------------------|--------------|
| | | | | | |
| neans related, by birth conclude that there was | byee / Member ble of decision-making that the process is open an or otherwise, closely enough that a fair minded and blas on the part of the decision-maker in the local statements apply to you and/or agent? | it illioi lilea obsi | El AEI' HEALING COMPLETED THE LOCAL | | :o* |
| lf Yes, please provide d | etails of their name, role and how you are related t | to them. | | | |
| 10. Materials | te what materials are to be used externally. Includ | e type. colour a | nd name for each material: | | |
| frapplicable, please sta | Existing (where applicable) | Proposed | | Not applicable | Don' Know |
| Walls | Brickwork = detail | Buckw to mo | ork details aton existing servatory. | | |
| Roof | Rooftiles | Flat (warm windo | moof finish roof with roof w + lanvern | | |
| Windows | White UPVC | match | e upvc to | | |
| Doors | White sprc | White | opve to make | | |
| Boundary treatments (e.g. fences, walls) | | | | o o | |

Version 2018.1

| Vehicle access and hard-standing | |
|--|--|
| Lighting | |
| Others (please specify) | |
| Are you supplying additional information on submitted plan(s)/draw if Yes, please state references for the plan(s)/drawing(s)/design and a | |

| 11. Ownership Certificates and Agric | ultural Land Declaration | |
|--|--|---|
| One Certificate | A, B, C, or D, must be completed with this applica RTIFICATE OF OWNERSHIP - CERTIFICATE A | |
| I certify/The applicant certifies that on the day 2 owner* of any part of the land or building to whis part of, an agricultural holding** | ment Management Procedure) (England) Order 2 11 days before the date of this application nobody e nich the application relates, and that none of the lan | xcept myself the applicant was the id to which the application relates is, or |
| NOTE: You should sign Certificate B, C or D, a application relates but the land is, or is part of | s appropriate, if you are the sole owner of the la of, an agricultural holding. | nd or building to which the |
| * "owner" is a person with a freehold interest or lea ** "agricultural holding" has the meaning given by | nsehold interest with at least 7 years left to run. y reference to the definition of "agricultural tenant" in | section 65(8) of the Act. |
| Signed - Applicant: | Or signed Agents | Date (DD/MM/YYYY): |
| | | 18.7.23 |
| * "owner" is a person with a freehold interest or led ** "agricultural tenant" has the meaning given in Name of Owner / Agricultural Tenant | isenoid interest with at least 7 years left to run. section 65(8) of the Town and Country Planning Act 19 Address | Date Notice Served |
| Name of Owner / Agricultural Tenant | Address | Date Notice Served |
| | | |
| | | |
| | | |
| | | |
| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |

| Town and Country Planning (Developm I certify/ The applicant certifies that; | RTIFICATE OF OWNERSHIP - CE nent Management Procedure) (for this application of find out the names and address ut I have/ the applicant has been usehold interest with at least 7 year. | RTIFICATE C England) Order 2015 Certificate under Article 14 es of the other owners* and/or agricultural tenants** of unable to do so. s left to run. |
|---|---|--|
| Name of Owner / Agricultural Tenant | Addres | 5 Date Notice Served |
| | | |
| | | |
| | | |
| Notice of the application has been published in (circulating in the area where the land is situated) | n the following newspaper ed): | On the following date (which must not be earlier than 21 days before the date of the application): |
| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |
| Town and Country Planning (Developm certify/ The applicant certifies that: Certificate A cannot be issued for this applicate A cannot be issued for this applications have been taken to | oplication find out the names and addresse and/or agricultural tenant** of a do so. sehold interest with at least 7 years | es of everyone else who, on the day 21 days before the ny part of the land to which this application relates, but I |
| Notice of the application has been published in t | the following newspaper | On the following date (which must not be earlier |
| circulating in the area where the land is situated | 1): | than 21 days before the date of the application): |
| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |

| 12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th | e information in support of your proposal. Fallure to submit all |
|--|---|
| Information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted. | nvalid. It will not be considered valid until all information required by |
| The original and 3 copies* of a Completed and dated application form: The original and 3 design and access proposed works for the original and 3 design an | s statement if |
| The original and 3 copies* of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application: | or completed, dated Ownership |
| *National legislation specifies that the applicant must provide the c total of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl | post (for example, on a CD, DVD of USB memory stick). |
| 13. Declaration I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, and genuine opinions of the person(s) giving them. | y facts stated are true and accurate and any opinions given are the |
| Signed - Applicant: O | Date (DD/MM/YYYY): 18.7.23 (date cannot be pre-application) |
| 14. Applicant Contact Details | 15. Agent Contact Details |
| Telephone numbers | Telephone numbers |
| Country code: National number: Extension number: | Country code: National number: Extension number: |
| Country co | Country code: Mobile number (optional): |
| | |
| Country code: Fax number (optional): | Country code: Fax number (optional): |
| Email address (optional): | Email address (optional): |
| | greg@gregsabertondesign.co.or. |
| 16. Site Visit Can the site be seen from a public road, public footpath, bridleway of | or other public land? Yes No |
| If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) | Agent Applicant Other (if different from the agent/applicant's details) |
| If Other has been selected, please provide: | |
| Contact name: | Telephone number: |