

County Hall Beverley East Riding of Yorkshire HU17 9BA

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

PAUL

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.

First name:

1. Applicant Name and Address

WILKS

Title:

Last name:

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

Title:

Last name:

2. Agent Name and Address

First name:

(optional):	(optional): SUTTON DESIGN LTO			
Unit: House number: 4 House suffix:	Unit: House 195 House suffix:			
House name:	House name:			
Address 1: LAMBERT PARK	Address 1: HOLDERNESS ROAD			
Address 2:	Address 2:			
Address 3:	Address 3:			
Town: HEOON	Town: HULL			
County: EAST YORKSHIRE	County: EAST YORKSHILE			
Country:	Country:			
Postcode: Hu12 8HF	Postcode: HU8 8TA			
3. Description of Proposed Works				
17.0				
Please describe the proposed works:				
	G APPLICATION FOR			
RETROSPECTIVE PLANNIN	G APPHICATION FOR OF THE PROPERTY			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR	OF THE PROPERTY.			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR AND ADDITION OF	G APPHICATION FOR OF THE PROPERTY. FRONT WINDOW TO GRST			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR	OF THE PROPERTY.			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR AND ADDITION OF	OF THE PROPERTY.			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR AND ADDITION OF	OF THE PROPERTY.			
RETROSPECTIVE PLANNING CONSERVATORY TO REAR AND ADDITION OF	OF THE PROPERTY.			

3. Description of Proposed Works (continued)	
Has the work already started? Yes No	
If Yes, please state when the work was started (DD/MM/YYYY):	15/5/23 (date must be pre-application submission)
Has the work already been completed?	
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site. House House	Is a new or altered vehicle access proposed to or from the public highway? Yes
number: 4 suffix:	Is a new or altered pedestrian access
House name:	proposed to or from the public highway? Yes No Do the proposals require any diversions,
Address 1: LAMBERT PARK	extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:	drawing(s):
Town: HEDON	
County: EAST YDEKSHIEE	
Postcode (optional): HU12 8HF	
	7. Trees and Hadres
6. Pre-application Advice Has assistance or prior advice been sought from the local	7. Trees and Hedges Are there any trees or hedges on your own
authority about this application? Yes No	property or on adjoining properties which
If Yes, please complete the following information about the advice	are within falling distance of your proposed development?
you were given. (This will help the authority to deal with this application more efficiently).	If Yes, please mark their position on a scaled
Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:
known, and then complete as much possible: Officer name:	
Officer frame.	
Reference:	
	Will any trees or hedges need to be removed or pruned in
Date (DD MM YYYY):	order to carry out your proposal?
(must be pre-application submission) Details of the pre-application advice received:	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	9. Authority Employee / Member
Will the proposed works affect existing car parking arrangements?	With respect to the Authority, I am: (a) a member of staff Do any of these
If Yes, please describe:	(b) an elected member statements apply to you?
	(d) related to a member of staff (d) related to an elected member
	If Yes, please provide details of the name, relationship and role

*	Existing (where applicable)	Proposed	Not applicable	Don't
Walls	REO FACING BRICKWORK			
Roof	FLAT GRP			
Windows	UPVC			
Doors	UPVC			
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard-standing				
Llghting				
Others (please specify)				
	tional information on submitted plan(s)/drawing(s ences for the plan(s)/drawing(s)/design and access	_	Ĺ	No
NZ696-Z3-AI	14 Head and 4 1 Annual 2 - 10 Telephone 2 10 Teleph	CATION PLAN		

11. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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 **

owner' of any agricultural holding to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding.

**Towner' is a person with a freehold interest or leasehold interest with at least 7 years left to run.

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**Towner' is a person with a freehold interest or leasehold interest with at least 7 years left to run.

**Or signed - Agent:

**Date (DD/MM/YYYY):

**Date (DD/MM/YYYY):

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B

**Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone ese (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.

**Towner' is a person with a freehold interest or leasehold interest with at least 7 years left to run.

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**Towner' is a person with a freehold in

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Town and Country Planning (De I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been to the land or building, or of a part * "owner" is a person with a freehold interest.	Agricultural Land Declaration (co CERTIFICATE OF OWNERSHIP - CERT velopment Management Procedure) (En issued for this application taken to find out the names and addresses of it, but I have/ the applicant has been un st or leasehold Interest with at least 7 years lead lyen in section 65(8) of the Town and Country	IFICATE C gland) Order 2015 Certificate u of the other owners* and/or agri able to do so. eft to run.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
Notice of the application has been public (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (which than 21 days before the date of	
			110 34 2 (2)4/
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
 Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the chave/ the applicant has been una "owner" is a person with a freehold interes 	ken to find out the names and addresses owner* and/or agricultural tenant** of any	gland) Order 2015 Certificate use of everyone else who, on the day part of the land to which this ap	21 days before the
Notice of the application has been publish (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 of	must not be earlier of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
12. Planning Application Require Please read the following checklist to makinformation required will result in your apthe Local Planning Authority has been sub-	ce sure you have sent all the information in polication being deemed invalid. It will not	support of your proposal. Failur be considered valid until all info	re to submit all rmation required by
The original and 3 copies of a completed and dated application form:	The original and 3 copies of a design and access statement if proposed works fall within a	The correct fee:	
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 and drawings or information necessary to describe the subject of the application:	n Conservation area or World Heritage Site, or relate to a Listed Building:	The original and 3 cop- completed, dated Owr Certificate (A, B, C or D applicable) and Article Certificate (Agricultura	nership – as 14

Signed - Applicant:	or signed - Agent:	7 77	/MM/YYYY): 7 · 2523 (date cannot be pre-application)
	X. /	Chl 03.0	7-2523 pre-application)
14. Applicant Contact Details	3	15. Agent Contact Details	
Telephone numbers		Telephone numbers	
Country code: National number:	Extension number:	Country code: National number:	Extension number:
		01482 70749	9
Country code: Viobile number (optional):		Country code: Mobile number (opti	The state of the s
Country code: Fax number (optional):		Country code: Fax number (optional	I):
Email address (optional):		Email address (optional):	
		SuttondesignLtd	@hotmail.com
16. Site Visit			
Can the site be seen from a public road, public footp	oath, bridleway or	other public land? Yes	No
If the planning authority needs to make an appoint out a site visit, whom should they contact? <i>(Please se</i>	ment to carry elect only one)	Agent Applicant	Other (if different from the agent/applicant's details)
If Other has been selected, please provide:			
Contact name:		Telephone number:	