

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

1- 1000

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.

1. Applicant Name and Address

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

2. Agent Name and Address

Title: MR First name: MOFING	Inde: MK2 Liest vame: MK2
Last name: O'BRIEN	Last name: Foster
Company (optional):	Company (optional): FOSTER+ WALSH LITD
Unit: House number: House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: THANE ROW	Address 1: OFFICE REMEC HOUSE
Address 2:	Address 2: Summit Works
Address 3:	Address 3: MANCHESTER ED.
Town: BURNIEY	TOWN: BURNLEY
County: LANCS	County: LANCS
Country: ENGLAND	Country: ENGLAND
Postcode: BB11 3Q4	Postcode: BBII 5H6
3. Description of Proposed Works	
Please describe the proposed works:	
PROPOSED SINGLE STOR	EY REAR EXTENSION
<i>f</i>	

a. Description of Proposed Works (continued)	
Has the work already started? Yes No	and the second
If Yes, please state when the work was started (DD/MM/YYYY):	
Has the work already been completed? Yes No	(date must be pre-application submission
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.	Is a new or altered vehicle access
Unit: House number: House suffix:	proposed to or from the public highway? Yes No
House name:	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
Address 1: THANE ROW	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2:	rights of way?
Address 3:	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):
Town: BURNEY	
County: LANCS	
Postcode (optional): BBII 3QY	2 . * * .
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?	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 known, and then complete as much possible:	plan and state the reference number of any plans or drawings:
Officer name:	
MELANIE JACKSON	
Reference:	
	Will any trees or hedges need to be removed or pruned in
Date (DD MM YYYY): must be pre-application submission)	order to carry out your proposal?
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.
1	
. Parking	9. Authority Employee / Member
Vill the proposed works affect xisting car parking arrangements? Yes CONO	With respect to the Authority, I am:
Yes, please describe:	(b) an elected member statements apply to you?
	(c) related to a member of staff (d) related to an elected member
THE COLUMN TO TH	If Yes, please provide details of the name, relationship and role
The state of the s	The state of the s

હ	Existing (where applicable)	Proposed	Not applicable	Don't
Walls	RANDOM STONE	RANDOM STONE+ K- REND		
Roof	STONE SLATES	STONE SLATES		
Windows	WOOD GRAIN PVC	GREY ANTHRACITE		
Doors	1 (
Boundary treatments (e.g. fences, walls)	н			6
Vehicle access and nard-standing	6		<u> </u>	6
ighting				6
Others please specify)				
	tional information on submitted plan(s)/drawing ences for the plan(s)/drawing(s)/design and;acce			No

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** NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: 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 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. *"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Address Date Notice Served

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

l certify/The applicant certifies that: Neither Certificate A or B can be is All reasonable steps have been ta	CERTIFICATE OF OWNERSHIP - CERT elopment Management Procedure) (En ssued for this application iken to find out the names and addresses if it, but I have/ the applicant has been unit or leasehold interest with at least 7 years le	IFICATE C gland) Order 2015 Certificate of the other owners* and/or agr able to do so. fit to run.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
Harry of Owner, 7 Agricultural Charles	Address	American recommendation of the second	Date Notice Served
	×		
Notice of the application has been publish (circulating in the area where the land is s	ned in the following newspaper ituated):	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
 certify/ The applicant certifies that: Certificate A cannot be issued for the common of the common of the certifies and the certifies that the certifies are certified as a certifies and the certifies are certified as a certifies and the certifies are certified as a certified as a	ken to find out the names and addresses of Wher* and/or agricultural tenant** of any ole to do so. Or leasehold interest with at least 7 years lef	gland) Order 2015 Certificate of everyone else who, on the day part of the land to which this a	u 71 days hafara the
		On the following date (which than 21 days before the date	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
12. Planning Application Require	ments - Checklist		
Please read the following checklist to make information required will result in your app the Local Planning Authority has been sub-	e sure you have sent all the information in dication being deemed invalid. It will not	support of your proposal. Failt be considered valid until all inf	ure to submit ali ormation required by
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 application relates drawn to an identified scale and showing the direction of North:	The original and 3 copies of a design and access statement if proposed works fall within a corresponding area or	The correct fee: The original and 3 corpleted, dated Ow Certificate (A, B, C or I	mership D – as
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:		applicable) and Artici Certificate (Agricultur	

I/we nereby apply for planning permission/consistent information. I/we confirm that, to the best of my genuine opinions of the person(s) giving them. Signed - Applicant:	ent as described in th /our knowledge, any Or signed Agent	12/top/2012 (date cannot be
14. Applicant Contact Details Telephone numbers		15. Agent Contact Details Telephone numbers
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
16. Site Visit Can the site be seen from a public road, public fo If the planning authority needs to make an appoi out a site visit, whom should they contact? (Pleas If Other has been selected, please provide: Contact name:	ntment to carry	r other public land? Yes No Applicant Other (if different from th agent/applicant's details) Telephone number: