

This form is specifically designed to be printed and completed offline.

Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

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

Application for Planning Permission

Town and Country Planning Act 1990 (as amended)

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 its obligations in regards to the processing of your application. Please refer to its 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:



Mid Suffolk District Council Planning Services
Endeavour House, 8 Russell Road,
Ipswich, IP1 2BX
Tel: 0300 1234000 option 5
Email: planning@baberghmidsuffolk.gov.uk
www.midsuffolk.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 Local Planning Authority directly.

1. Applicant Name and Address							
Title:	Mr	First name:	Phillip				
Last name:	Squirrel	I					
Company (optional):							
Unit:		House number:	House suffix:				
House name:							
Address 1:	Three Gables						
Address 2:	High Roa	nd					
Address 3:							
Town:	Great Fink	oorough					
County:							
Country:							
Postcode:	IP14 3AC)]				

2. Agent	Name and Address						
Title:	First name:						
Last name:							
Company (optional):	Ken Judge & Assocaites Ltd						
Unit:	House House suffix:						
House name:							
Address 1:	The Barn, Monument Office						
Address 2:	Unit 4, Maldon Road						
Address 3:	Woodham Mortimer						
Town:							
County:							
Country:							
Postcode:	CM9 6SN						

3. Description of the Proposal								
Please describe the proposed development, including any change	of use:							
Demolition of existing detached garage and erection of nev	w pitched roof detached garage							
Has the building, work or change of use already started?	Yes No							
If Yes, please state the date when building, work or use were started (DD/MM/YYYY):	(date must be pre-application submission							
Has the building, work or change of use been completed?	Yes No							
If Yes, please state the date when the building, work or change of use was completed (DD/MM/YYYY):	(date must be pre-application submission							
Reference number of permission in principle being relied on (technical details consent applications only):								
Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/595 as amended by article 3 of S.I. 746/2021)?	☐ Yes No							
A. Site Address Details Please provide the full postal address of the application site. Unit: House number: House suffix: House name: Address 1: High Road Address 2: Suffolk Address 3: Town: Great Finborough County: Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description:	S. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? If 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 as possible: Officer name: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?							

6. Pedestrian and Vehicle Access, Road	ds and Righ	ts of Way	7. Waste Sto	rage and Collection		
ls a new or altered vehicle access proposed to or from the public highway?	Yes	∑ No	Do the plans inc	corporate areas to store ection of waste?	Yes	∑ No
Is a new or altered pedestrian access proposed to or from the public highway?	Yes	∑ No	If Yes, please pro	ovide details:		
Are there any new public roads to be provided within the site?	Yes	∑ No				
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	∑ No				
Do the proposals require any diversions /extinguishments and/or creation of rights of way?	Yes	⊠ No	Have arrangement for the separate collection of rec	_	Yes	∑ No
If you answered Yes to any of the above que details on your plans/drawings and state the (s)/drawings(s)	estions, pleas e reference o	se show of the plan	If Yes, please pr	ovide details:		
8. Authority Employee / Member It is an important principle of decision-makin means related, by birth or otherwise, closely conclude that there was bias on the part of t	enough that	t a fair-minde	ed and informed o	bserver, having considere	•	
Do any of the following statements apply to	you and/or a	agent?	Yes 🔀 No	With respect to the auth (a) a member of staff (b) an elected member (c) related to a member (d) related to an elected	of staff	
If Yes, please provide details of their name,	role and how	you are rela	ted to them.			

9. Materials If applicable, please state what materials are to be used externally. Include type, colour and name for each material:								
	Existing (where app	olicable)		Proposed		Not applicable	Don' Knov	
Walls	Facing	Brickwork		Facing Brickwork				
Roof	Flat Ro	oof		Tiled Pitched Roof				
Windows	N/A			UPVC				
Doors								
Boundary treatments (e.g. fences, walls)								
Vehicle access and hard-standing								
Lighting								
Others (please specify)								
			_	s)/design and access stateme	nt? Yes		No	
If Yes, please state references for the plan(s)/drawing(s)/design and access statement: Drawings nos 2703/1, 2 & 3								
10. Vehicle Parkin	_	the existing and propose	ed number of o	n-site parking spaces:				
Type of Vehic		Total Existing	Tota	l proposed (including spaces retained)	Difference in spaces			
Cars Light goods veh public carrier vel	Cars 2 Light goods vehicles/			2	2			
Motorcycles								
Disability space	ces							
Cycle space:	5							
Other (e.g. Bu	ıs)							

Other (e.g. Bus)

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank X Other	☐ Yes ☐ No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider
	the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere? Yes No
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
, and the second	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological	Residential
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant? Yes No
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development No	When did this use end (if known)?
b) Designated sites, important habitats or other biodiversity	DD/MM/YYYY (date where known may be approximate)
features:	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on the development site	assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
No No	to the presence of contamination.
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character? Yes No	
If Yes to either or both of the above, you may need to provide a full	
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be	
submitted alongside your application. Your local planning authority should make clear on its website what the survey should	
contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'.	

	Propos	ed Hou	sing					Existi	ng l	Hous	ing			
Market	Not	Num	ber of	Bedr	ooms	Total	Market	Not		Numl	oer of	Bedr	ooms	Tota
Housing	known	1 2	3	4+	Unknown	1	Housing	known	1	2	3	4+	Unknown	
Houses						а	Houses							а
Flats/maisonettes						Ь	Flats/maisonettes							Ь
Sheltered housing						С	Sheltered housing							С
Bedsit/studios						d	Bedsit/studios							d
Cluster flats						е	Cluster flats							е
Other						f	Other							f
		Totals (ía + b +	- c + a	(1+e+f)=	Α			То	tals (a	ı + b +	- c + a	(+e+f)=	F
Social, Affordable	Not	Num	ber of	Bedr	ooms	Total	Social, Affordable	Not		Numl	oer of	Bedr	ooms	Tota
or Intermediate Rent	known	1 2	3	4+	Unknown	1	or Intermediate Rent	known	1	2	3	4+	Unknown	
Houses						а	Houses							а
Flats/maisonettes						Ь	Flats/maisonettes							Ь
Sheltered housing	$+ \overline{\Box} +$					С	Sheltered housing							С
Bedsit/studios	$+\Box$					d	Bedsit/studios							d
Cluster flats						е	Cluster flats							е
Other						f	Other							f
		Totals (a + b +	- c + a	1 + e + f = 1	В		Totals $(a + b + c + d + e + f) =$! + e + f) =	G		
Affordable Home			ber of			Total	Affordable Home			Numl				Tota
Ownership	Not known	1 2	3	4+	Unknowr	_	Ownership	Not known	1	2	3	_	Unknown	
Houses						а	Houses							а
Flats/maisonettes						Ь	Flats/maisonettes							Ь
Sheltered housing						С	Sheltered housing							С
Bedsit/studios						d	Bedsit/studios							d
Cluster flats						е	Cluster flats							е
Other						f	Other							f
		Totals (a + b +	- c + a	1+e+f)=	C			То	tals (a	ı + b +	- c + a	(+e+f)=	Н
	Not	Num	ber of	Bedr	ooms	Total		Not		Numl	per of	Bedr	ooms	Tota
Starter Homes	known	1 2	3	4+	Unknown		Starter Homes	known	1	2	3		Unknown	
Houses						а	Houses							а
Flats/maisonettes						Ь	Flats/maisonettes							Ь
Bedsit/studios						0	Bedsit/studios							С
Other						d	Other							d
		Т	otals ((a + b	+c+d)=	D				To	tals	(a + b	+c+d)=	/
Self Build and	Not	Num	ber of	Bedr	ooms	Total	Self Build and	Not		Numl	oer of	Bedr	ooms	Tota
Custom Build	known	1 2	3	4+	Unknown		Custom Build	known	1	2	3	4+	Unknown	
Houses						а	Houses							а
Flats/maisonettes						Ь	Flats/maisonettes							Ь
Bedsit/studios						С	Bedsit/studios				L			С
Other						d	Other							d
					+ c + d) =								+ c + d) =	т —

Use class/type of use Shops	Does you	ır proposal iı	nvolve the lo	ss, ga	in or change of us	se of non-resid	ential floorsp		⊠ No
Net tradable area:	<u> </u>					Gross internal to be lost by use or der	floorspace change of nolition	Total gross internal floorspace proposed (including change of	Net additional gross internal floorspace following development (square metres)
A2 prisancial and process A3 Restaurants and cafes A4 Drinking establishments A5 Hot food takeaways A6 Hot food takeaways A6 Hot food takeaways A7 Hot food takeaw	A1	Sh	ops						
A professional services		Net trada	able area:						
A3 Restaurants and cafes	A2	Financ	cial and nal services						
A5 Hot food takeaways	A3	•							
B1 (a) Office (other than A2)	A4	Drinking est	tablishments						
Bit (b) Research and development	A5	Hot food	takeaways						
B1 (c)	B1 (a)	Office (oth	er than A2)						
B1 (c) Light industrial	B1 (b)								
Storage or distribution	B1 (c)		•						
C1 Hotels and halls of residence	B2	General	industrial						
C2 Residential institutions D1 Non-residential institutions D2 Assembly and leisure D3 Assembly and leisure D4 D4 D5	B8	Storage or	distribution						
C2 Residential institutions	C1								
Assembly and leisure	C2								
D2 Assembly and leisure	D1								
Please Specify Total In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Type of use Applicable Statisting rooms to be lost by change of use or demolition Structure of use or demolitication Structure of use or demolition Structure of use o	D2								
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Type of use applicable of use or demolition or demolitically use or demolit	OTHER	R							
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use class Type of use applicable C1 Hotels C2 Residential institutions and hostels, please additionally indicate the loss or gain of rooms Net additional rooms Net additional rooms Net additional rooms Please C2 Residential C2 Residential C3 Residential C4 Residential C5 Residential C5 Residential C5 Residential C5 Residential C5 Residential C6 Residential C6 Residential C7 R	Please								
Use class Type of use Not applicable Existing rooms to be lost by change of use or demolition Total rooms proposed (including changes of use) Net additional rooms	эрсспу	To	otal						
Use class Type of use Not applicable Existing rooms to be lost by change of use or demolition Total rooms proposed (including changes of use) Net additional rooms	In add	Ldition, for ho	tels, residen	tial ins	stitutions and hos	tels, please ad	ditionally ind	licate the loss or gain of	rooms
Residential Institutions	class	Type of use		Existi	ng rooms to be lo of use or demo	ost by change olition	Total room ch	s proposed (including anges of use)	Net additional rooms
Institutions									
Please pecify 9. Employment Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees N/A N/A Proposed employees N/A N/A O. Hours of Opening f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A Proposed:									
9. Employment Please complete the following information regarding employees: Full-time	OTHER								
Please complete the following information regarding employees: Full-time	Please Specify								
Existing employees N/A N/A N/A Proposed employees N/A N/A O. Hours of Opening f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known N/A N/A N/A N/A N/A N/A		•		ormat	tion regarding em	nployees:			
Proposed employees N/A N/A O. Hours of Opening f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known N/A N/A N/A N/A N/A		Full-time				Part	time		
O. Hours of Opening f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known N/A N/A N/A N/A N/A		3 1 /							
Saturday Not known N/A N/A N/A N/A N/A N/A N/A N/	Prop	posed emplo	oyees		N/A	IN/A			
Use Monday to Friday Saturday Sunday and Bank Holidays Not known N/A N/A N/A	20. Ho	urs of Ope	ning						
N/A N/A N/A N/A N/A	lf known	, please state	e the hours o	f oper	ning (e.g. 15:30) fo	or each non-re	sidential use	<u> </u>	
N/A N/A N/A		Use	M	onday	to Friday	Saturda	y		Not known
1. Site Area				N/A		N/A		N/A	
1. Site Area									
1. Site Area									
	21. Site	Area							

Please state the site area m2

22. Industrial or Commercial Processes and Machinery							
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:							
Is the proposal a waste management develo	pmen	t? Yes	∑ No				
If the answer is Yes, please complete the foll	owing	table:					
	Not applicable	including engirallowance for	acity of the void in neering surcharge cover or restoration d waste or litres if	and making on material (or (or literal if liquid unate)		
Inert landfill							
Non-hazardous landfill							
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant							
Pyrolysis/gasification							
Metal recycling site							
Transfer stations							
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites							
Open windrow composting							
In-vessel composting							
Anaerobic digestion							
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works							
Other treatment							
Recycling facilities construction, demolition and excavation waste							
Storage of waste							
Other waste management							
Other developments							
Please provide the maximum annual operat	ional t	hroughput of th	e following waste	streams:			
Municipal							
Construction, demolition and e		tion					
Commercial and industr	ial						
Hazardous		: .l			a contra determina di Verritoria		
If this is a landfill application you will need to planning authority should make clear what	inform	nation it requires	s on its website.	л аррпсацо	n can be determined. Your waste		
23. Hazardous Substances							
Does the proposal involve the use or storage the following materials in the quantities stat	Does the proposal involve the use or storage of any of						
If Yes, please provide the amount of each su	bstand	ce that is involve	ed:				
Acrylonitrile (tonnes)	Et	thylene oxide (to	onnes)		Phosgene (tonnes)		
Ammonia (tonnes)	Hydro	ogen cyanide (to	onnes)		Sulphur dioxide (tonnes)		
Bromine (tonnes)	L	iquid oxygen (to	onnes)		Flour (tonnes)		
Chlorine (tonnes) Lic	quid p	etroleum gas (to	onnes)	Re	efined white sugar (tonnes)		
Other:			Other:				
Amount (tonnes):			Amount (ton	nes):			

24. 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**

is part or, arragineartarar rioraring				
NOTE: You should sign Certificate B, C application relates but the land is, or is	or D, as approp	riate, if you are the sole owner of the land of cultural holding.	or building to	o which the
* "owner" is a person with a freehold intere ** "agricultural holding" has the meaning o	st or leasehold int given by reference	erest with at least 7 years left to run. e to the definition of "agricultural tenant" in sect	ion 65(8) of th	ne Act.
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
		Gary Taylor-Ken Judge & Assocaites Ltd	d	06.11.2023
21 days before the date of this application application relates. * "owner" is a person with a freehold interest.	on, was the ownerst or leasehold int	has given the requisite notice to everyone eler* and/or agricultural tenant** of any part of the rest with at least 7 years left to run. (8) of the Town and Country Planning Act 1990 Address	se (as listed k of the land or	pelow) who, on the day building to which this Date Notice Served
Nume of Owner / Agricultural Teriant		Address		Date Notice Served

24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I 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* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. "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 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served** Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Date (DD/MM/YYYY): Or signed - Agent: **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that:

Certificate A cannot be issued for this application

All reasonable steps have been taken to find out the names and addresses of everyone else 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 to which this application relates, but I have/ the applicant has been unable to do so.

* "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

The steps taken were:		
Notice of the application has been publis (circulating in the area where the land is s	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):

25. Planning Application Requiremen	ts - Checklist		
Please read the following checklist to make sure information required will result in your application the Local Planning Authority (LPA) has been subr	n being deemed i		
The original and 3 copies* of a completed and da application form:	ated	The correct fee:	
The original and 3 copies* of the plan which ider to which the application relates drawn to an ider and showing the direction of North:		if required (see help text ar The original and 3 copies*	of a design and access statement, and guidance notes for details): of a fire statement, if required
The original and 3 copies* of other plans and dra information necessary to describe the subject of	_	(see help text and guidanc The original and 3 copies* Certificate (A, B, C or D – as and Article 14 Certificate (A	of the completed, dated Ownership applicable)
*National legislation specifies that the applicant total of four copies), unless the application is sub LPAs may also accept supporting documents in e You can check your LPA's website for information	mitted electronica electronic format b n or contact their p	ally or, the LPA indicate that a sr by post (for example, on a CD, D' planning department to discuss	naller number of copies is required. VD or USB memory stick). these options.
Plans can be bought from one of the Planning P	ortal's accredited	suppliers: https://www.planning	gportal.co.uk/buyaplanningmap
26. Declaration I/we hereby apply for planning permission/conseinformation. I/we confirm that, to the best of my, genuine opinions of the person(s) giving them. Signed - Applicant:		ny facts stated are true and acci	Date (DD/MM/YYYY):
	Ken Judge & <i>i</i>	Associates Ltd	06.11.2023 (date cannot be pre-application)
27. Applicant Contact Details Telephone numbers		28. Agent Contact De	etails
Country code: National number: Country code: Mobile number (optional):	Extension number:	Country code: National 2255	
Country code: Fax number (optional):			per (optional):
Email address (optional):		Email address (optional): info@kenjudgeltd.co.	uk
29. Site Visit			
Can the site be seen from a public road, public fo	otpath, bridleway	or other public land? Yes	No
If the planning authority needs to make an appoint out a site visit, whom should they contact? (Pleas	ntment to carry e select only one)	🗸 Agent 📗 App	olicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide: Contact name:		Telephone number:	
Mr G Taylor		01245 225577	
Email address: info@kenjudgeltd.co.uk			