Chichester District Council

East Pallant House
1 East Pallant
Chichester
West Sussex PO19 1TY
Email: dcplanning@chichester.gov.uk
Telephone: (01243) 534734



Application for a Lawful Development Certificate for an Existing use or operation or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2010

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.

It 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:	MN First name: P.R.W.	Title: First name: O. H.	4					
Last name:	LULK	Last name: IAM 85-						
Company (optional):	= 3 	(optional): 30060BD + UPTO	2~					
Unit:	House number: House suffix:		louse uffix:					
House name:		House name:						
Address 1:	BLACK HORSE LARAVAN	Address 1: SOUTHERSE						
Address 2:		Address 2:						
Address 3:	SELSEX	Address 3:						
Town:	CHICHUSTER	Town: CHICHUSTER						
County:	WEST SUSSEX	County: W857 505562						
Country:	F P	Country:						
Postcode:	Pozo ala	Postcode: PO19 185						

3. Site Address Details						4. Pre-application Advice						
Please provide	the full p	ostal addre	ess of the a	application site.		Has assistance or prior advice been sought from the local authority about this application?						
Unit:		House number:		House suffix:		authority about this application? Yes No						
House name:					If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this							
Address 1:	BLACE	K HOI	154	CANAVAN		application Please tick it			are not			
Address 2:			μ	PARK		known, and						
Address 3:	Mill	LAN	16	. 7		Officer nam	ie:					
Town:	566.	LAN SEY		Reference:	-0'							
County:	WES.	1 50	556X	(×			
Postcode (optional):	1020	980				(must be no		DD/MM/YYY				
Description of (must be com				n):			3 5	n submissior on advice red				
Easting:			Northing:		\exists		1					
Description:												
					1				*			
									*			
5. Lawful D	evelon	ment Ce	rtificate	- Interest In La	nd							
Please state th												
Owner: 🗸	Yes [No		Lessee:	Yes	☐ No		Occupier	Yes No			
If Yes to Less	ee or Occ	upier pleas	e give det	ails of the owner ar	nd sta	te whether th	ey have bee	n informed i	n writing of this application:			
	Name		*		A	Address		*	Have they been informed in writing of the application Yes No			
2		en en										
If No to all th	e above,	please give	name an	d address of anyon	e you	know who ha	s an interes	t in the land:				
Name Addres			dress	of t	te the nature their interest (if known)	have been	ether they n informed application No	If No, please explain why not				
						- 1			a _k - 60			
p-							Q.					
						N						
6. Authoris With respect t (a) a member (b) an elected If Yes, please	to the Aut of staff I member	hority, I an (c) r (d) r	n: elated to a elated to a	a member of staff an elected member elationship and role			Do any of t	hese stateme	ents apply to you?			
g .				¥					, * *			

7. Description of Use, Building Works or Activity	8. Description of Existing Use, Building Works or Activity
Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):	What is the existing site use(s) for which the certificate of lawfulness is being sought? Please fully describe each use and
An existing use: No	state which part of the land the use relates to:
Existing building works: Yes No	THE LAND IS USED AS A
An existing use, building work or activity in breach of a condition:	SITE FOR A RESIDENTIAL
Being a use, building works or activity which is still going on at the date of this application	BY THE SITE WARDEN GOR
If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the	DI ARLE WORSE INCAURANT
use relates to:	PACK AND THERE FAMILY
N P	PARK PROS
* · · · · · · · · · · · · · · · · · · ·	
9. Grounds For Application For A Lawful Developmen	t Certificate
Please state under what grounds is the certificate sought (you must t	
The use began more than 10 years before the date of this applic	
The use, building works or activity in breach of condition began	
	of use not requiring planning permission, and there has not been a
change of use requiring planning permission in the last 10 years	•
of this application.) were substantially completed more than four years before the date
The use as a single dwelling house began more than four years I	pefore the date of this application.
Other - please specify (this might include claims that the change	ge of use or building work was not development, or that it benefited
from planning permission granted under the Act or by the Gene If the certificate is sought on 'Other' grounds please give details:	rai Permitted Development Order).
	•
	and the same of th
If applicable, please give the reference number of any existing plann notice affecting the application site. Include its date and the number Reference	er of any condition being breached:
Number: Number:	Date (DD/MM/YYYY): (must be pre application submission)
Please state why a Lawful Development Certificate should be grante	
THE WALLEN WALLAND COL	G THE ABOUT PLANNING SOUNISSON
FX 11051 02 31/02/2011	o vous aguou reappen to the terminor
10. Information In Support Of A Lawful Development	
When was the use or activity begun, or the building works substantially completed:	(date must be pre-application submission) (DD/MM/YYYY)
In the case of an existing use or activity in breach of conditions has t	
If Yes, please provide details of the dates, duration and any disconti your application is based on the claim that a use or activity has interruption occurred:	nuance of the development which is the subject of this application. If been ongoing for a period of years, please state exactly when any
	F
	*
· · · · · · · · · · · · · · · · · · ·	a **
In the case of an existing use of land, has there been any material ch of use of the land since the start of the use for which a certificate is	
If Yes please provide details?	
	4
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* * *	Propo	sed F	lousi	ng	į.			Existing Housing					
							ſ		Numb	ner of F	edron	ms -	To
	1 2 3 4+ Unknown					Total	6	1	2	ber of Bedrooms 3 4+ Unknowr			200.00
Market Housing							Market Housing						
Houses							Houses						
Flats & Maisonettes							Flats & Maisonettes						
ive-Work Units							Live-Work Units			Y			
Cluster Flats							Cluster Flats						
Sheltered Housing							Sheltered Housing						
Bedsit/Studios							Bedsit/Studios			:		÷	
Unknown							Unknown						
Market Ho	ising To	otal (a	+ b + c	+ d + e	(+f+g)=		Market Hou	sing T	otal (a	+ b + c	+ d + e	+f+g)=	
Social Rented Housing	1	2	3	4+	Unknown		Social Rented Housing	1	2	3	4+	Unknown	
Houses							Houses						
Flats & Maisonettes	18						Flats & Maisonettes						
ive-Work Units				<u> </u>			Live-Work Units						-
Cluster Flats							Cluster Flats						-
Sheltered Housing							Sheltered Housing					-	
Bedsit/Studios			-	-			Bedsit/Studios		-	-	<u> </u>		-
Unknown		-	-	-			Unknown		-				\vdash
Social Rented Hou	ising To	otal (a ·	+ h + c	+ d + e	p + f + a = 0		Social Rented Hou	sina T	otal (a	+ b + c	+ d + e	(+f+a)=	
Intermediate Housing	1	2	3	4+	Unknown		Intermediate	1	2	3	4+	Unknown	
Houses		-	-	-			Housing Houses			-	-		
Flats & Maisonettes	-	-	-	-	-		Flats & Maisonettes			-	-	-	-
Live-Work Units	-	+-	-						-		-	-	-
Cluster Flats	-	-	-		ļ		Live-Work Units				-		-
Sheltered Housing	-		-	-	-		Cluster Flats		-	,			-
Bedsit/Studios	-	-	-	-			Sheltered Housing		-		-		-
Unknown	-	-	-		-		Bedsit/Studios		-	-		-	-
							Unknown		<u> </u>	<u> </u>	<u> </u>		\vdash
Intermediate Ho	ising i	otal (a	+b+c	+d+6	(2+f+g)=		Intermediate Hou	sing T	otal (a	+ 6 + 6	+ d + 6	(2+t+g)=	<u> </u>
Key Worker Housing	1	2	3	4+	Unknown		Key Worker Housing	1	2	3	4+	Unknown	
Houses							Houses						
Flats & Maisonettes		e				2,	Flats & Maisonettes						_
Live-Work Units						1	Live-Work Units						
Cluster Flats						, fa	Cluster Flats	1					
	4					10	Sheltered Housing						
Sheltered Housing							Bedsit/Studios						
Sheltered Housing Bedsit/Studios													
		4					Unknown						

11. Planning Application Requirements - C Please read the following checklist to make sure you ha information required will result in your application bein the Local Planning Authority has been submitted. The burden or proof in a Lawful Development Certifical should be provided.	ave sent all the ing deemed inva	alid. It will not be considered valid until all information	n required by					
The original and 3 copies of a completed dated application form:	Ø	The original and 3 copies of such evidence verifying the information included in the application as you can provide:	∞ ′					
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:	Ø	The correct fee:	Ø					
12. Declaration I/we hereby apply for a Lawful Development Certificate information. I/we confirm that, to the best of my/our kn genuine opinions of the person(s) giving them.								
Signed - Applicant		Or signed - Agent						
Signed - Applicant		Of signed angent						
Date (DD/MM/YYYY): 24 (10 (20 23) (date cannot be pre-application submission) WARNING: The amended section 194 of the 1990 Act provides that it is an offence to furnish false or misleading information or to withhold material information with intent to deceive. Section 193(7) enables the authority to revoke, at any time, a certificate they may have issued as a result of such false or misleading information.								
13. Applicant Contact Details		14. Agent Contact Details						
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Telephone numbers Country code: National number: 01143 793966 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:					
15. Site Visit		i,						
Can the site be seen from a public road, public footpat	h. bridleway or	other public land? Yes No						
If the planning authority needs to make an appointme out a site visit, whom should they contact? (Please selections)	nt to carry	Agent Applicant Other (if diff	ferent from the icant's details)					
If Other has been selected, please provide:		uganasppn	carre s actains,					
Contact name:		Telephone number:						

Email address: