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

Privacy Notice

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This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting nformation 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.

Joon 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.

_ocal Planning Authority details:



Planning and Sustainable Development

Correspondence address Cornwall Council - Planning, PO Box 676, Threemilestone, Truro, TR1 9EQ Telephone 0300 1234 151 | Email planning@comwatl.gov.uk

www.cornwall.gov.uk

Publication on Local Planning Authority websites

nformation 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.

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

t 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: MR First name: GRAHAM	Title: First name:
Last name: TROTWAN	Last name:
Company (optional):	Company (optional):
Unit: House 73 House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: TRELAWNEY AVENUE	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: STIVES	Town:
Country: CORNWALL Country: CNCLAND	County:
Country: ENCLAND	Country:
Postcode: TR 26 1BS	Postcode:

Please describe the proposed works:	
NOW DRIVEWAY TO PRODU	UCE TWO OFF ROAD
Has the work already started? If Yes, please state when the work was started (DD/MM/YYYY): Has the work already been completed?	(date must be pre-application submission)
If Yes, please state when the work was completed (DD/MM/YYYY):	M/A (date must be pre-application submission)
Address 3: Town: Cornulation Cornulation Address 3: County: Cornulation Corn	S. Pedestrian and Vehicle Access, Roads and Rights of Way s a new or altered vehicle access proposed to or from the public highway? Yes No ls a new or altered pedestrian access proposed to or from the public highway? Yes No 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): New Dreper Kerrs & Creassovers.
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 possible: Officer name: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	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: 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.

o. Parking Will the proposed wo	rks affect existing car parking arrangements?	Yes □ No			
If Yes, please describe					
LO ONE	E SAACE ON SIDE READ				
conclude that there w	ciple of decision-making that the process is open a h or otherwise, closely enough that a fair minded a as bias on the part of the decision-maker in the lo	and informed obse al planning autho	rver, having considered the facts, rity.	, would	to"
Do any of the following statements apply to you and/or agent? Yes With respect to the authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member					
	The state of the s	TO MOIN			,
10. Materials					
it applicable, please sta	ite what materials are to be used externally. Inclu-	de type, colour and	i name for each material:		
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls	NIA				
Roof	· NIA				
Windows	NJA				
Doors	NIA				
Boundary treatments (e.g. fences, walls)	WOODEN FENCE WITH GATE	NEW W AT ROT DRIVE	TOODEN FENCE TROF WEW		

id. Marchais				
If applicable, please st	ate what materials are to be used externa	ally. Include type, colour and name for each material:		
Vehicle access and hard-standing	NONE	NEW DRIVE LAID IN BLOCK PAVERS ACO DRAIN & SOAKAWAY		
Lighting	NIA			
Others (please specify)	NIA			
Are you supplying add	litional information on submitted plan(s)	/drawing(s)/design and access statement?	s [No
If Yes, please state refe	rences for the plan(s)/drawing(s)/design	and access statement		

SPECIFICATION DRAWINGS SUPPLIED 01-10, DESIGN & ACCESS

STATEMENT, HIA,

i t. Ownersmp Gerungales 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 Or signed - Agent: Date (DD/MM/YYYY): 07/11/2023 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 "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** Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

11. Ownersmy Gerundates and A	yncululai Lano Decialation (co	munueu)	
 I certify/ The applicant certifies that: Neither Certificate A or B can be is All reasonable steps have been ta the land or building, or of a part of * "owner" is a person with a freehold interest 	ken to find out the names and addresses of it, but I have/ the applicant has been ur	ngland) Order 2015 Certificat of the other owners* and/or a hable to do so. eft to run.	
N/A			
Name of Owner / Agricultural Tenant	Address		Date Notice Served
			
Notice of the application has been publis (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (whi than 21 days before the da	ch must not be earlier te of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY
f certify/ The applicant certifies that: Certificate A cannot be issued for t	ken to find out the names and addresses Wner* and/or agricultural tenant** of any ole to do so. Or leasehold interest with at least 7 years le	gland) Order 2015 Certificate of everyone else who, on the d part of the land to which this	
Notice of the application has been publish (circulating in the area where the land is si	ed in the following newspaper tuated):	On the following date (which than 21 days before the dat	ch must not be earlier e of the application):

Or signed - Agent:

Date (DD/MM/YYYY):

Signed - Applicant:

12. Flamming Application Requirements - Checklist	2 6-2 5/76 9 9 9 020
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	e information in support of your proposal. Failure to submit all valid. 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 copies* of a design and access	
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	II within a The original and 3 copies* of the completed, dated Ownership
and drawings or information necessary to describe the subject of the application:	
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their plants.	post (for example, on a CD, DVD or 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, any genuine oploions of the person/s) giving them. S Or signed - Agent:	y facts stated are true and accurate and any opinions given are the
	, , , pro approaching
14. Applicant Contact Details	15. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National pumber: Extension number:	Country code: National number: Extension number:
	NA
Country code: Mobile number (optional):	Country code: Mobile number (optional):
NIA	
Country code: Fax number (optional):	Country code: Fax number (optional):
N/A	
Email address (ontional):	Email address (optional):
16. Site Visit	
Can the site be seen from a public road, public footpath, bridleway o	or other public land? Ves No
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	or other public land?
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Agent Applicant Other (if different from the agent/applicant's details)
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) if Other has been selected, please provide: Contact name:	□ Agent □ Applicant □ Other (if different from the
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Agent Applicant Other (if different from the agent/applicant's details)
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) if Other has been selected, please provide: Contact name:	Agent Applicant Other (if different from the agent/applicant's details)