



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

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 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.

Local Planning Authority details:

Wyre Council Civic Centre, Breck Road Poulton-le-Fylde, Lancashire FY6 7PU

Tel: (01253) 891000 Fax: (01253) 887252 planning@wyre.gov.uk

www.wyre.gov.uk/planning



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 authority directly.

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

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

Applicant Name and Address			
Title:	MR First name: STEVEN		
Last name:	JOHNSON		
Company (optional):			
Unit:	House 16 House suffix:		
House name:			
Address 1:	STANAH GARDENS		
Address 2:			
Address 3:			
Town:	THORNTON CLEVELEYS		
County:	LANCASHINE		
Country:	ENALUND		
Postcode:	FY5 5JH		
Postcode:	FY 5 5JH		

2. Agent	Name and Address		
Title:	MR First name: LINDSAY		
Last name:	ORANI		
Company (optional):	LINDSAY ORAM ARCHITECT		
Unit:	7 House House suffix:		
House name:			
Address 1:	FYCREATIVES		
Address 2:	154-158 CHURCH SPEET		
Address 3:			
Town:	BLACKPOOL		
County:	LANCASHINE		
Country:	ENGLAND		
Postcode:	FY1 3PS		

3. Description of Proposed Works			
Please describe the proposed works:			
DEMOLITION OF EXISTING SIDE AND REAR EXTENSIONS NEW SINGLE STOREY SIDE AND REAR EXTENSIONS TO			
NEW SINGLE STOREY SIDE	AND REAK EXIGISION TO		
FORM UTTLITY AND SHOWE	EN TO FORM NEW DINING		
AND EXTENSION TO KITCH	EN 10 FORTH NEW DISTRICT		
AREA			
las the work already started? Yes No			
If Yes, please state when the work was started (DD/MM/YYYY):	(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. Unit: House House suffix:	Is a new or altered vehicle access proposed to or from the public highway? Yes Vho		
Unit: number: 16 suffix: House	Is a new or altered pedestrian access proposed to or from the public highway? Yes Yes		
name:	Do the proposals require any diversions,		
Address 1: 6TANAH GARDENS	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: THORNTON CLEVELEYS			
County: LANCASHINE			
Postcode (optional): FY5 5 JH			
6. Pre-application Advice	7. Trees and Hedges		
Has assistance or prior advice been sought from the local authority about this application?	Are there any trees or hedges on your own 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	If Yes, please mark their position on a scaled		
application more efficiently). 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:			
Reference:	Will any trees or hedges need		
	to be removed or pruned in order to carry out your proposal?		
Date (ØD MM YYYY): (must be pre-application submission)	If Yes, please show on your plans which trees by giving them		
Details of the pre-application advice received:	numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.		
	ALBERTAIS(O) SITE ITISISEE ITIO OOLIO.		

8. Parking Will the proposed works	affect existing car parking arrangements?	/es No		
If Yes, please describe:				
9. Authority Employee / Member It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority. 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				
If Yes, please provide details of their name, role and how you are related to them.				
10. Materials If applicable, please state what materials are to be used externally. Include type, colour and name for each material:				
	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	BRICK + RENDER	BRICK + RENDER		
Roof	TILE	TILE		
Windows	ирис	чрис		
Doors	upro GURS	upvc GUSS		
Boundary treatments (e.g. fences, walls)		N/A.		

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10. Materials				
If applicable, please sta	te what materials are to be used externally. Include	e type, colour and name for each material:		
Vehicle access and hard-standing				
Lighting		N/A·		
Others (please specify)				
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No				
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:				
EXISTING PUN, ELEVATIONS, SITE + SITE LOCATION PLAN PROPOSED PLAN, ELEVATIONS + SITE PLAN PROPOSED SECTIONS + NOTES				

1. 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 CERTIFICATE OF OWNERSHIP - CER			
Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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 a part of, an agricultural holding**				
NOTE: You should sign Certificate B, C application relates but the land is, or is		to which the		
* "owner" is a person with a freehold interest ** "agricultural holding" has the meaning giv	or leasehold interest with at least 7 years left to run. ven by reference to the definition of "agricultural tenant" in section 65(8) of t	he Act.		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):		
		07/11/2023		
I certify/ The applicant certifies that I have 21 days before the date of this application application relates.	relopment Management Procedure) (England) Order 2015 Certificate re/the applicant has given the requisite notice to everyone else (as listed in, was the owner* and/or agricultural tenant** of any part of the land of the least of the least of the land of the least of the land of the least of the le			
Name of Owner / Agricultural Tenant	Address	Date Notice Served		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):		

	ultural Land Declaration (a	ontinued)	
11. Ownership Certificates and Agric CEI Town and Country Planning (Developm	DIECATE OF OWNERSHIP - CER	RTIFICATE C	te under Article 14
 I certify/ The applicant certifies that: Neither Certificate A or B can be issued All reasonable steps have been taken to the land or building, or of a part of it, but "owner" is a person with a freehold interest or lea * "agricultural tenant" has the meaning given in set 	for this application of find out the names and address t I have/ the applicant has been used to the property with at least 7 years	es of the other owners* and/or	
The steps taken were:			
	,		
Name of Owner / Agricultural Tenant	Address	3	Date Notice Served
	/		
Notice of the application has been published i (circulating in the area where the land is situat	n the following newspaper ed):	On the following date (whether than 21 days before the control of	late of the application):
Signed Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
CE Town and Country Planning (Developm	RTIFICATE OF OWNERSHIP - CE	RTIFICATE D	te under Article 14
I certify/ The applicant certifies that: Certificate A cannot be issued for this a All reasonable steps have been taken to date of this application, was the owner' have/ the applicant has been unable to "owner" is a person with a freehold interest or lea "agricultural tenant" has the meaning given in se The steps taken were:	opplication of find out the names and addresse and/or agricultural tenant** of a do so. sehold interest with at least 7 years	es of everyone else who, on the ny part of the land to which this left to run.	day 21 days before the
Notice of the application has been published in (circulating in the area where the land is situate	the following newspaper d):	On the following date (who than 21 days before the d	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):

2. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the i	nformation in support of your proposal. Failure to submit all
nformation required will result in your application being deemed invaling he Local Planning Authority (LPA) has been submitted.	APPLICANT TO *
The original and 3 copies* of a completed and dated application form: The original and 3 copies* of a design and access start proposed works fall very complete to the comple	atement if
The original and 3 copies* of a plan which conservation area or dentifies the land to which the application World Heritage Site, or	completed, dated Ownership or relate to a Certificate (A. B. C or D – as
relates drawn to an identified scale and showing the direction of North: The original and 3 copies* of other plans	applicable) and Article 14 Certificate (Agricultural Holdings):
describe the subject of the application:	
*National legislation specifies that the applicant must provide the orig otal of four copies), unless the application is submitted electronically o LPAs may also accept supporting documents in electronic format by pos You can check your LPA's website for information or contact their plan	SI HOI EXCHIDIC. OH & OD, DVD OF COD MICH.
13. Declaration	form and the accompanying plans/drawings and additional
I/we hereby apply for planning permission/consent as described in this information. I/we confirm that, to the best of my/our knowledge, any fagenuine opinions of the person(s) giving them.	cts stated are true and accurate and any opinions given are the
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):
	07/11/2023 (date cannot be pre-application)
14. Applicant Contact Details	15. Agent Contact Details
Telephone numbers	Telephone numbers Extension
Country code: National number: Extension number:	Country code: National number: number:
Country code: Mobile number (optional):	Country code: Mobile number (optional):
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
16. Site Visit Can the site be seen from a public road, public footpath, bridleway or	other public land? Yes No
If the planning authority needs to make an appointment to carry	Other (if different from the
out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:	Telephone number:
Contact name:	respirate number.