

Householder Application for Planning Permission for works or extension to a dwelling and for relevant demolition of an unlisted building in a conservation area  
 Town and Country Planning Act 1990

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 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:**

**Test Valley**  
Borough Council

**Planning and Building Service**

www.testvalley.gov.uk  
 planning@testvalley.gov.uk  
 01264 368000 / 01794 527700

**Publication of applications on 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.

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.

**1. Applicant Name and Address**

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

**2. Agent Name and Address**

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

**3. Description of Proposed Works**

Please describe the proposed works:

PART CONVERSION OF GARAGE TO FORM UTILITY  
 SINGLE STOREY SIDE EXTENSION.

Has 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 been completed?  Yes  No

If Yes, please state when the work was completed (DD/MM/YYYY):  (date must be pre-application submission)

**4. Site Address Details**

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference. (must be completed if postcode is not known):

Easting:  Northing:

Description:

**5. Pre-application Advice**

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

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:

Reference:

Date (DD/MM/YYYY):  (must be pre-application submission)

Details of the pre-application advice received:

**6. Pedestrian and Vehicle Access, Roads and Rights of Way**

Is a new or altered vehicle access proposed to or from the public highway?  Yes  No

Is a new or altered pedestrian access proposed to or from the public highway?  Yes  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)

**7. Trees and Hedges**

Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development?  Yes  No

If Yes, please mark their position on a scaled plan and state the reference number of any plan(s)/drawing(s):

Will any trees or hedges need to be removed or pruned in order to carry out your proposal?  Yes  No

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.

**8. Parking**

Will the proposed works affect existing car parking arrangements?  Yes  No

If Yes, please describe:

GARAGE SPACE REMOVED. PARKING ON SITE RETAINED.

**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  No

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

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	RENDER	TO MATCH	<input type="checkbox"/>	<input type="checkbox"/>
Roof	TILE	ROLLED LEAD	<input type="checkbox"/>	<input type="checkbox"/>
Windows	UPVC	TO MATCH	<input type="checkbox"/>	<input type="checkbox"/>
Doors	- DO -	- DO -	<input type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard-standing	PAVED	AS EXIST	<input type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others (please specify)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

PLANS AS EXISTING | PLANS AS PROPOSED D.#A.  
 BIO DIVERSITY FORMS

**11. Explanation For Proposed Demolition Work**

Why is it necessary to demolish all or part of the building(s) and or structure(s)?

N/A

**12. 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:  Or signed - Agent:  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

Signed - Applicant:  Or signed - Agent:  Date (DD/MM/YYYY):

**13. Planning Application Requirements - Checklist**

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.

The original and 3 copies\* of a completed and dated application form:  The original and 3 copies\* of a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building:  The correct fee:

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 the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):

The original and 3 copies\* of other plans and drawings or information necessary to describe the subject of the application:

\*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.

**14. Declaration**

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Signed - Applicant:  Or signed - Agent:  Date (DD/MM/YYYY):  (date cannot be pre-application)

**15. Applicant Contact Details**

Telephone numbers

Country code:  National number:  Extension number:

Country code:  Mobile number (optional):

Country code:  Fax number (optional):

Email address (optional):

**16. Agent Contact Details**

Telephone numbers

Country code:  National number:  Extension number:

Country code:  Mobile number (optional):

Country code:  Fax number (optional):

Email address (optional):

**17. 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 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:

Contact name:  Telephone number:

Email address: