

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

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 2015

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:



Magdalen House 30 Trinity Road Bootle L20 3NJ planning.department@sefton.gov.uk 0345 140 0845 option 4

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:	Mrs First name: Diane							
Last name:	Robinson							
Company (optional):								
Unit:	House number: 9 House suffix:							
House name:								
Address 1:	9 Park Avenue							
Address 2:								
Address 3:								
Town:	Liverpool							
County:	Merseyside							
Country:	United Kingdom							
Postcode:	L31 0BT							

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:	

					_				
	ddress Det	-)	· ·	plication		
Please prov	ride the full po	-	ess of the app				nce or prior bout this ap		sought from the local
Unit:		louse umber:	9	House suffix:				prication	Yes X No
House name:						you were g	iven. (This w	vill help the a	ng information about the advice authority to deal with this
Address 1:	9 Park Avenu	ıe					more effici	ently). ntact details	are not
Address 2:									h as possible:
Address 3:						Officer nan	ne:		
Town:	Liverpool					Reference:			
County:	Merseyside								
Postcode (optional):	L31 0BT							(DD/MM/YY	
Description	of location on the completed if postpleted if postpleted if postpleted if postpleted in the complete district in the comp	or a grid re ostcode is	 eference. s not known):			·		on submissic ion advice re	•
Easting:			Northing:						
Description	า:								
					<u> </u>				
	=			nterest In La	nd				
_	the applican	_	it in the land:						
Owner: x		No			Yes	∐ No		Occupie	
If Yes to Le	essee or Occu	pier pleas	se give details	s of the owner ar	id stat	te whether th	ey have bee	en informed	in writing of this application: Have they been informed
	Name				А	ddress			in writing of the application
									Yes No
If No to all	the above, p	lease give	e name and a	ddress of anyone	you l	know who ha	1	t in the land: ether they	
N	ame		Addres	SS	of t	te the nature heir interest if known)	have beer	n informed application No	If No, please explain why not

6. Authority Employee / Member It is an important principle of decision-making that the process is open means related, by birth or otherwise, closely enough that a fair-mind			ıı
conclude that there was bias on the part of the decision-maker in the			
Do any of the following statements apply to you and/or agent?	Yes x 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 rela	ated to them.		
7. Description of Use, Building Works or Activity	8. Description of	of Existing Use, Building Works or Acti	 ivitv
Please state for which of these you need a lawful development certificate/building works (you must tick at least one option): An existing use: Yes No	What is the existing lawfulness is being	ng site use(s) for which the certificate of g sought? Please fully describe each use and f the land the use relates to:	·
	state which part o	Title land the use relates to.	
Existing building works.			
An existing use, building work or activity in breach of a condition:	Hip to gable and r	ear dormer	
Being a use, building works or activity which is still going on at the date of this application			
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 use relates to:			
9. Grounds For Application For A Lawful Developmen	t Certificate		
Please state under what grounds is the certificate sought (you must t	cick at least one box):		
The use began more than 10 years before the date of this applic	cation.		
The use, building works or activity in breach of condition began	•	, ,	
The use began within the last 10 years, as a result of a change change of use requiring planning permission in the last 10 years. The building works (for instance, building or engineering works)	5.		
of this application.	•	·	
The use as a single dwelling house began more than four years Other - please specify (this might include claims that the change)			fited
from planning permission granted under the Act or by the Gene	eral Permitted Develo	pment Order).	iiica
If the certificate is sought on 'Other' grounds please give details:			
We have completed PD works and request a lawful development certifi	cate.		
If applicable, please give the reference number of any existing plant notice affecting the application site. Include its date and the number	ning permission, lawfu er of any condition be	Il development certificate or enforcement eing breached:	
Reference BLC/ Condition Number: 015594/01540854 Number:	Date (DD/MM/ (must be pre a	YYYY): oplication submission) 13/12/2022	
Please state why a Lawful Development Certificate should be grante	•	- F	
We have completed PD works and request a lawful development certifi	cate.		

10. Information In Support Of A Lawful Development C	Certificate	_	
When was the use or activity begun, or the building works substantially completed:	(date must be pre-application su (DD/MM/YYYY)	ubmission)	
In the case of an existing use or activity in breach of conditions has the	ere been any interruption?	Yes	X No
If Yes, please provide details of the dates, duration and any disconting your application is based on the claim that a use or activity has be interruption occurred:	uance of the development which een ongoing for a period of yea	is the subject of this ars, please state exac	application. If tly when any
In the case of an existing use of land, has there been any material char of use of the land since the start of the use for which a certificate is so	nge ught?	Yes	X No
If Yes please provide details?			

	for a Ce	ertificat	te relat	e to a		•	Certificate (Continue the number of resident					ormation Yes [No
	Proposed Housing							Existing Housing					
	Number of Bedrooms 7			Total		Number of Bedrooms					Total		
Market	1	2	3	4+	Unknown		Market	1	2	3	4+	Unknown	
Housing							Housing						
Houses						а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						g	Unknown						g
Market Hou	sing To	otal (a	+ b + c	+ d + 6	e + f + g) =	А	Market Hou	sing To	otal (a	+ b + c	+ d + e	e + f + g) =	E
Social Rented Housing	1	2	3	4+	Unknown		Social Rented Housing	1	2	3	4+	Unknown	
Houses						а	Houses						а
Flats & Maisonettes						Ь	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						g	Unknown						g
Social Rented Hou	sing To	tal (a -	+ b + c	+ d + 6	e + f + g = 0	В	Social Rented Hou	sing To	otal (a	+ b + c	+ d + e	(f + f + g) =	F
Intermediate Housing	1	2	3	4+	Unknown		Intermediate Housing	1	2	3	4+	Unknown	
Houses						а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						g	Unknown						g
Intermediate Hous	sing To	ntal (a -	+ b + c	+ d + 6	e + f + g = 0	С	Intermediate House	sing To	otal (a	+ b + c	+ d + e	(f + f + g) =	G
Key Worker Housing	1	2	3	4+	Unknown		Key Worker Housing	1	2	3	4+	Unknown	
Houses						а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						7	Unknown						g
Key Worker Hous	ina Tot	<u> </u> tal (a +	<u>b+</u> ← +	<u> </u> - d + ⊖ -	<u> </u> + f + a) =	g D	Key Worker House	sina Ta	otal <i>(a</i>	<u> </u> + b + c	+ d + e	(f + f + a) = 0	Н
		-a. (a /	2,07			D	itey worker flour	9 '	- tai (u	. 210		9/ =	11
Proposed Hou	sing Gr	rand To	otal	(A + B	+ C + D) =		Existing Hous	sing G	rand T	otal	(E + F	+ G + H) =	
TOTAL NET GAIN or	LOSS	of RESI	DENTI	IAL UN	IITS (Propo	sed Hou	sing Grand Total - Exist	ing Ho	using	Grand	Total):	

Please read the f information requ the Local Plannii	y Application Requirements - Of following checklist to make sure you how the will result in your application being Authority (LPA) has been submitted roof in a Lawful Development Certificated.	ave sent all the ng deemed inv d.	valid. It will not be	considered valid until all information	required by
•	d application form:	X	verifying	inal and 3 copies* of such evidence g the information included in lication as you can provide:	X
and to which th	3 copies* of a plan which identifies th e application relates drawn to an and showing the direction of North:	e X	The corr	rect fee:	X
total of four cop LPAs may also a	ation specifies that the applicant must ies), unless the application is submitte ccept supporting documents in electro our LPA's website for information or co	d electronically onic format by	y or, the LPA indica post (for example)	ate that a smaller number of copies is on a CD, DVD or USB memory stick).	ıments (a required.
nformation. I/w	ion ly for a Lawful Development Certificat e confirm that, to the best of my/our k ns of the person(s) giving them.				
Signed - Applica	ant		Or signed - Ager	nt	
Date (DD/MM/Y	YYY):				
27/03/2024	(date cannot be pre-applicat	ion submission	n)		
information with	ection 194 of the 1990 Act provides than n intent to deceive. Section 193(7) ena lse or misleading information.	at it is an offen	ce to furnish false (
13. Applican	t Contact Details		14. Agent C	ontact Details	
Telephone num	bers			nbers	
	National number:	Extension number:	Country code:	National number:	Extension number:
Country code	Malaila ayyahay (aytisaa)		Country code	AAabila maalaan (aatian al)	
Country code:	Mobile number (optional):]	Country code:	Mobile number (optional):	
Country code:	Fax number (optional):		Country code:	Fax number (optional):	
	rax name (optional).			r ax name cr (optional).	
Email address (c	pptional):		Email address (optional):	
15 C:+-\/:-:+					
15. Site Visit		ميروريرو الوثورط الطو			
	een from a public road, public footpat outhority needs to make an appointme	•	r otner public land	χ	
out a site visit, w	hom should they contact? (Please sele	ct only one)	Agent		erent from the :ant's details)
	n selected, please provide:		Tolombon	bon	
Contact name:			Telephone num	iber:	
ſ					
Email address:					