

This form is specifically designed to be printed and completed offline.

Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

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

Householder Application for Planning Permission for works or extension to a dwelling

Town and Country Planning Act 1990 (as amended)

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:



8/153/0676/24

2 3 ... 2 2024

Willow House, Mareham Rd, Horncastle, Lincolnshire, LN9 6PH

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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 Local Planning Authority directly.

1. Applic	ant Name and Address
Title:	MR & MRS First name: RON
Last name:	SMITH
Company (optional):	
Unit:	House number: 82 House suffix:
House name:	
Address 1:	BERESFORD AVENUE
Address 2:	
Address 3:	
Town:	SKEGHESS
County:	LINCS.
Country:	
Postcode:	PE25 3JQ

2. Agent Name and Address				
Title:	MR First name: ANDREW			
Last name:	CULLEY			
Company (optional):				
Unit:	House number: House suffix:			
House name:	CRAHBROOK HOUSE			
Address 1:	MARKET PLACE			
Address 2:	BURGH LE MARSH			
Address 3:				
Town:	SKEGHESS			
County:	LINCS.			
Country:				
Postcode:	PEZ4 SJW			

6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Trees and Hedges
Is a new or altered vehicle access proposed to or from the public highway? Yes Vo	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development?
Is a new or altered pedestrian access proposed to or from the public highway? Yes No	If Yes, please mark their position on a scaled plan and state the reference number of any plan(s)/drawing(s):
Do the proposals require any diversions, extinguishments and/or creation of public rights of way?	
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)	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	Vos. IVANO
Will the proposed works affect existing car parking arrangements? If Yes, please describe:	Yes No
in rest predict describer	
9. Authority Employee / Member It is an important principle of decision-making that the process is ope	en and transparent. For the purposes of this question, "related to"
means related, by birth or otherwise, closely enough that a fair-minde conclude that there was bias on the part of the decision-maker in the	ed and informed observer, having considered the facts, would
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
If Yes, please provide details of their name, role and how you are rela	
F	

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**

owner* of any part of the land or building to while part of, an agricultural holding**	ch the application relates, and that none of the land	d to which the application relates is, or
NOTE: You should sign Certificate B, C or D, as application relates but the land is, or is part of	appropriate, if you are the sole owner of the land, an agricultural holding.	nd or building to which the
* "owner" is a person with a freehold interest or leas ** "agricultural holding" has the meaning given by	ehold interest with at least 7 years left to run. reference to the definition of "agricultural tenant" in s	ection 65(8) of the Act.
Signed - Applicant:	O <u>r signed - Agent:</u>	Date (DD/MM/YYYY):
		22/04/2024
application relates. * "owner" is a person with a freehold interest or leas ** "agricultural tenant" has the meaning given in se	the owner* and/or agricultural tenant** of any passenbld interest with at least 7 years left to run. Section 65(8) of the Town and Country Planning Act 19	90
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 Failure to submit all information required will result in your application information required by the Local Planning Authority (LPA) has been	on being deemed invalid. It will not be considered valid until all	
The original and 3 copies* of a completed and dated application form:	The correct fee:	
The original and 3 copies* of the 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 a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building:	
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.	The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):	
*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 pla	post (for example, on a CD, DVD or USB memory stick).	
14. 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 opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent	r facts stated are true and accurate and any opinions given are the	
15. Applicant Contact Details	16. Agent Contact Details	
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	
Email address (optional):	Email address (optional):	
17. Site Visit Can the site be seen from a public road, public footpath, bridleway of 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:	r other public land? Yes No Applicant Other (if different from the agent/applicant's details)	