

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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

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

1. Applicant Name and Address

Title: **MR/MRS** First name:

Last name: **LENNANE**

Company (optional):

Unit: House number: House suffix:

House name: **CASTLE COTTAGE**

Address 1: **KINGS CARLE**

Address 2:

Address 3:

Town:

County: **HEREFORDSHIRE**

Country: **ENGLAND**

Postcode: **HR1 4UB**

2. Agent Name and Address

Title: First name:

Last name:

Company (optional): **DAVID EDWARDS & ASSOCIATES**

Unit: House number: House suffix:

House name:

Address 1: **STATION APPROACH**

Address 2:

Address 3:

Town: **HEREFORD**

County:

Country: **ENGLAND**

Postcode: **HR1 1BB**

3. Description of Proposed Works

Please describe the proposed works:

CONSTRUCTION OF A SINGLE STOREY, DOUBLE-PITCHED ROOF EXTENSION AT REAR OF EXISTING PROPERTY TO HOUSE UTILITY, STORE & WET ROOM/W.C.. EXISTING UTILITY ROOM TO BE PARTIALLY DEMOLISHED, AND TWO EXISTING INTERNAL WALLS TO BE REMOVED TO FORM ENLARGED KITCHEN/DINING AREA. FIRST FLOOR BEDROOM DORMER WINDOW TO BE MOVED FROM WEST TO EAST ELEVATION AND NEW VELUX INSTALLED.

Revised 27.07.2010

If Yes, please state when the work was started (DD/MM/YYYY):

(date must be pre-application submission)

Has the work already 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:

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)

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 pre-application advice received?

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.

	Existing (where applicable)	Proposed	Not applicable	Dor Kno
External walls	1/ CAVITY 2/ STONE 3/ HALF-TIMBERED	CAVITY BRICK/BLOCK RENDERED AND PAINTED WHITE.	<input type="checkbox"/>	<input type="checkbox"/>
Roof covering	TRAD. GREY SLATE	TRAD. GREY SLATE	<input type="checkbox"/>	<input type="checkbox"/>
Chimney			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windows	WHITE UPVC DOUBLE GLAZED	WHITE UPVC DOUBLE GLAZED	<input type="checkbox"/>	<input type="checkbox"/>
External doors	WHITE UPVC DOUBLE GLAZED	WHITE UPVC DOUBLE GLAZED.	<input type="checkbox"/>	<input type="checkbox"/>
Ceilings		P/BOARD & SKIM	<input type="checkbox"/>	<input type="checkbox"/>
Internal walls		P/BOARD & SKIM	<input type="checkbox"/>	<input type="checkbox"/>
Floors		CONCRETE / TILED.	<input type="checkbox"/>	<input type="checkbox"/>
Internal doors		TO MATCH EXISTING	<input type="checkbox"/>	<input type="checkbox"/>
Rainwater goods		100 GUTTERING 75 DOWN-PIPES TO MATCH EXISTING	<input type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard standing			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others (add description)			<input type="checkbox"/>	<input type="checkbox"/>

Are you supplying additional information on submitted drawings or plans? ☒ Yes

If Yes, please state plan(s)/drawing(s) references:

DRAWG. NOS 3119 - 01 & 02 AND

HEALTH & SAFETY
DEVELOPMENT CONTROL
21.10.2011
TO: D. & A. STATEMENT
Ack'd. _____ File _____

total demolition of a listed building? ☐ Yes ☒ No

If Yes, which of the following does the proposal involve?

a) Total demolition of the listed building: ☐ Yes ☐ No

b) Demolition of a building within the curtilage of the listed building: ☐ Yes ☐ No

c) Demolition of a part of the listed building: ☐ Yes ☐ No

If the answer to c) is Yes:

i) What is the total volume of the listed building?(cubic metres)	
ii) What is the volume of the part to be demolished?(cubic metres)	
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	

Please provide a brief description of the building or part of the building you are proposing to demolish:

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

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to a listed building? ☐ Yes ☒ No

If Yes, do the proposed works include: (you must answer each of the questions)

a) Works to the interior of the building? ☐ Yes ☐ No

b) Works to the exterior of the building? ☐ Yes ☐ No

c) Works to any structure or object fixed to the property (or buildings within its curtilage) internally or externally? ☐ Yes ☐ No

d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? ☐ Yes ☐ No

If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s)

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11. Listed Building Grading

Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic Interest? (Note: only one box must be ticked)

Grade I ☐ Ecclesiastical Grade I ☐

Grade II* ☐ Ecclesiastical Grade II* ☐

Grade II ☒ Ecclesiastical Grade II ☐

Don't know ☐

12. Immunity From Listing

Has a Certificate of Immunity from Listing been sought in respect of this building?

☐ Yes ☐ No ☒ Don't know

If Yes, please provide the result of the application:

HERETOBY RECEIVED PLANNING SERVICES DEVELOPMENT CONTROL 27 JUL 2010 To: _____ Name: _____

13. Parking

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

If Yes, please describe:

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14. Authority Employee / Member

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

Do any of these statements apply to you
☐ Yes ☒ No

If Yes, please provide details of the name, relationship and role

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CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

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 (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land or building which the application relates.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY)

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

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 (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land or building to which this application relates.

Name of Owner	Address	Date Notice Served

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY)

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

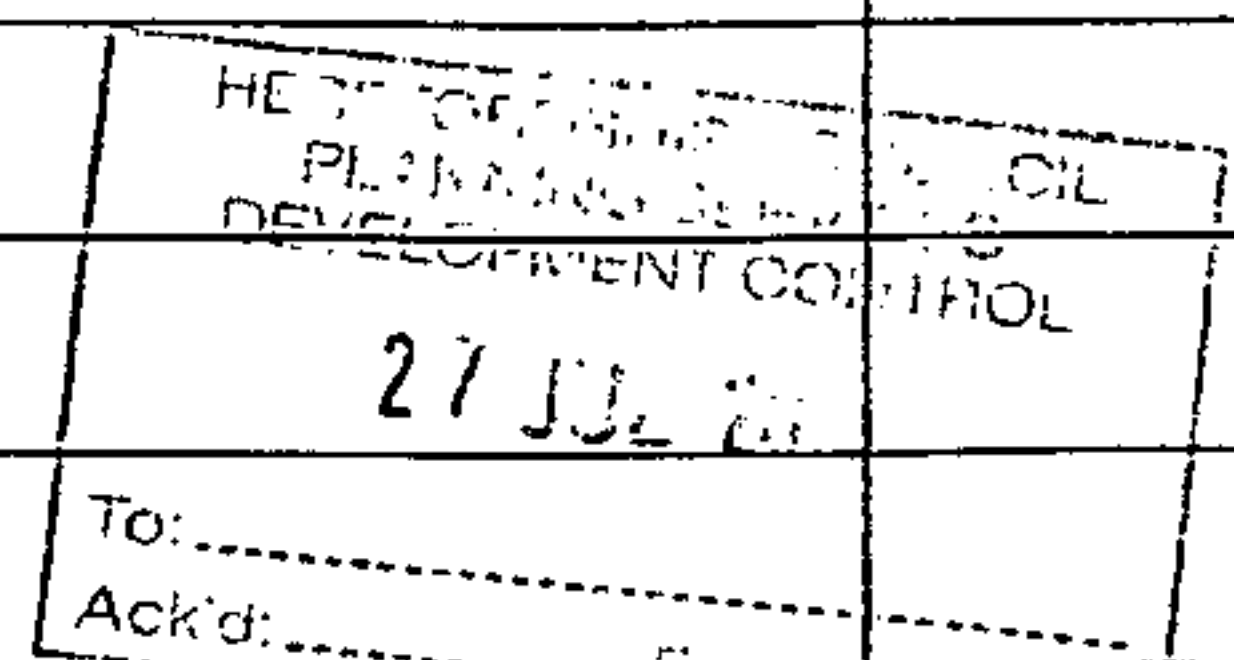
Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I certify/ The applicant certifies that:

- Neither Certificate A or B can be issued for this application
- All reasonable steps have been taken to find out the names and addresses of the other owners (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

The steps taken were:

Name of Owner	Address	Date Notice Served



Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY)

Information:

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

(date cannot be pre-application)

19. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension number:

01432

840486

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

20. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension number:

01432

269158

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

21. 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:

