

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

**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.

### 1. Applicant Name, Address and Contact Details

|                                                                                                                   |                    |             |       |                   |                 |                  |  |
|-------------------------------------------------------------------------------------------------------------------|--------------------|-------------|-------|-------------------|-----------------|------------------|--|
| Title:                                                                                                            | Mr                 | First name: | BARRY | Surname:          | MOTH            |                  |  |
| Company name                                                                                                      |                    |             |       |                   |                 |                  |  |
| Street address:                                                                                                   | 76 Sunnymead Drive |             |       | Country Code      | National Number | Extension Number |  |
|                                                                                                                   |                    |             |       | Telephone number: |                 |                  |  |
|                                                                                                                   |                    |             |       | Mobile number:    |                 |                  |  |
| Town/City                                                                                                         | Waterlooville      |             |       | Fax number:       |                 |                  |  |
| County:                                                                                                           | Hampshire          |             |       | Email address:    |                 |                  |  |
| Country:                                                                                                          | United Kingdom     |             |       |                   |                 |                  |  |
| Postcode:                                                                                                         | PO7 6BX            |             |       |                   |                 |                  |  |
| Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No |                    |             |       |                   |                 |                  |  |

### 2. Agent Name, Address and Contact Details

|                 |                  |             |     |                   |                             |                  |  |
|-----------------|------------------|-------------|-----|-------------------|-----------------------------|------------------|--|
| Title:          | Mr               | First Name: | SAM | Surname:          | APPLETON                    |                  |  |
| Company name:   | Thorns-Young ltd |             |     |                   |                             |                  |  |
| Street address: | 232 London Road  |             |     | Country Code      | National Number             | Extension Number |  |
|                 | North End        |             |     | Telephone number: | 023 9267 2883               |                  |  |
|                 |                  |             |     | Mobile number:    |                             |                  |  |
| Town/City       | Portsmouth       |             |     | Fax number:       |                             |                  |  |
| County:         | Hampshire        |             |     | Email address:    |                             |                  |  |
| Country:        | United Kingdom   |             |     |                   |                             |                  |  |
| Postcode:       | PO2 9JQ          |             |     |                   | s.appleton@thornsyoun.co.uk |                  |  |

### 3. Description of Proposed Works

Please describe the proposed works:

RAISING ROOF OF EXISTING BUNGALOW TO CONVERT LOFT SPACE

Has the work already been started  
without planning permission?

☐ Yes ☒ No

#### 4. Site Address Details

Full postal address of the site (including full postcode where available)

|                 |                                              |         |                      |
|-----------------|----------------------------------------------|---------|----------------------|
| House:          | <input type="text" value="76"/>              | Suffix: | <input type="text"/> |
| House name:     | <input type="text"/>                         |         |                      |
| Street address: | <input type="text" value="Sunnymead Drive"/> |         |                      |
|                 | <input type="text"/>                         |         |                      |
| Town/City:      | <input type="text" value="Waterlooville"/>   |         |                      |
| County:         | <input type="text" value="Hampshire"/>       |         |                      |
| Postcode:       | <input type="text" value="PO7 6BX"/>         |         |                      |

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

|           |                                     |
|-----------|-------------------------------------|
| Easting:  | <input type="text" value="467619"/> |
| Northing: | <input type="text" value="110784"/> |

Description:

#### 5. 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, extinguishment and/or  
creation of public rights of way?

☐ Yes ☒ No

#### 6. 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):

Officer name:

Title:  First name:  Surname:

Reference:

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

Details of the 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

Will any trees or hedges need to be removed or pruned in order to carry out your proposal?

☐ Yes ☒ No

#### 8. Parking

Will the proposed works affect existing car parking arrangements?

☐ Yes ☒ No

#### 9. 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

#### 10. 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)

☐ The agent ☒ The applicant ☐ Other person

#### 11. Materials

Please state what materials (including type, colour and name) are to be used externally (if applicable):

## 11. (Materials continued)

### Walls - description:

Description of *existing* materials and finishes:

EXISTING GABLE WALLS - RENDERED

Description of *proposed* materials and finishes:

PROPOSED GABLE WALLS - TILE HANGING TO MATCH ROOF TILES

### Roof - description:

Description of *existing* materials and finishes:

CONCRETE TILES

Description of *proposed* materials and finishes:

CONCRETE TILES

### Windows - description:

Description of *existing* materials and finishes:

UPVC

Description of *proposed* materials and finishes:

UPVC TO MATCH EXISTING IN COLOUR AND STYLE

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

☐

Yes

☒

No

## 12. Certificates (Certificate A)

### Certificate of Ownership - Certificate A

#### Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

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 to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding ("*agricultural holding*" has the meaning given by reference to the definition of "*agricultural tenant*" in section 65(8) of the Act).

Title:

Mr

First name:

SAM

Surname:

APPLETON

Person role:

Applicant

Declaration date:

04/11/2014



Declaration made

## 13. 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.



Date

04/11/2014