

Copeland Borough Council The Copeland Centre, Catherine Street, Whitehaven, Cumbria CA28 7SJ tel: 0845 054 8600 fax: 01946 59 83 03 email: info@copeland.gov.uk web: www.copeland.gov.uk

Householder Application for Planning Permission for works or extension to a dwelling. 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	2. Agent Name and Address	
Title: MR First name: PAUL	Title: MR First name: ALAN	
Last name: HARTLEY	Last name: WALKER	
Company (optional):	Company (optional):	
Unit: House House Suffix:	Unit: House House suffix:	
House name:	House name: ROCKLAND	
Address 1: MOOR CARDENS	Address 1: LADY HALL	
Address 2: HODGSON GARDENS	Address 2:	
Address 3:	Address 3:	
Town: MILLOM	Town: MILLOM	
County: CUMBRIA	County: Cembria	
Country: ENGLAMD	Country: ENGLAMD	
Postcode: LA18 SLE	Postcode: LA18 SHR	
3. Description of Proposed Works		

Please describe the proposed works: REMOVE CONSERVATORY IFRETT TH

REMOVE CONSERVATORY. ERECT TWO STORE EXTENSION ON SOUTH ELEVATION

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3. Description of Proposed Works (continued)	0
Has the work already started?	· · · · · · · · · · · · · · · · · · ·
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 Yes	
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.	5. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access
Unit: House House suffix:	proposed to or from the public highway? Yes No
House name:	proposed to or from the public highway? Yes No
Address 1: Access CAROLINE	Do the proposals require any diversions, extinguishments and/or creation of public rights of way?
Address 2: HODGSON GARDENS	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:	drawing(s):
Town: MILLOM	
County: CumBR.A	
Postcode (optional): LAIS 5LE	
6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes Yes 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 possible: Officer name: 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 If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings: Will any trees or hedges need to be removed or pruned in order to carry out your proposal? 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 If Yes, please describe:	9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff Do any of these (b) an elected member statements apply to you? (c) related to a member of staff Yes (d) related to an elected member No If Yes, please provide details of the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	Don' Know
Walls	WHITE SPAR, + PLAIN CEMENT BANDS TO OPENINGS	WHITE SPAR + PLAIN CEMENT BANDS TO OPENINGS -TO MATCH		
Roof	FLAT GREY CEMENT TILES	FLAT GREY CEMENT TILES TO MATCH		
Windows ,	WHITE U.PVC.	WHITE URVE TO MATCH		
Doors	WHITE NAVC	WHITE UPVC TO MATCH + ANTHRACITE GREY ALUMINIUM FRAME BI-FOLD ODORSET.		
Boundary treatments (e.g. fences, walls)	BLOCKWOORK WALLS	AS EXISTING UNTOUCHED		3
Vehicle access and nard-standing				
Lighting			U	
Others (please specify)			4	
	l itional information on submitted plan(s)/drawing(s rences for the plan(s)/drawing(s)/design and acces:		[Nc

11. Ownership Certificates and	Agricultural Land Declaration	0
One Certif	ficate A, B, C, or D, must be completed with this application fo	orm V,
	CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
I certify/The applicant certifies that on the	velopment Management Procedure) (England) Order 2010 Ce e day 21 days before the date of this application nobody except n g to which the application relates, and that none of the land to wh	nyself/ the applicant was the
NOTE: You should sign Certificate B, C application relates but the land is, or is	or D, as appropriate, if you are the sole owner of the land or b s part of, an agricultural holding.	building to which the
* "owner" is a person with a freehold interes ** "agricultural holding" has the meaning g	st or leasehold interest with at least 7 years left to run. 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):
		09/09/2021
I certify/ The applicant certifies that I have 21 days before the date of this application application relates. * "owner" is a person with a freehold interest	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2010 Ce ve/the applicant has given the requisite notice to everyone else (on, was the owner* and/or agricultural tenant** of any part of th st or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1990	(as listed below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
. :		
,		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

 I certify/ The applicant certifies that: Neither Certificate A or B can be iss All reasonable steps have been tak 	CERTIFICATE OF OWNERSHIP - CERT lopment Management Procedure) (En sued for this application ten to find out the names and addresses it, but I have/ the applicant has been un or leasehold interest with at least 7 years le	TIFICATE C agland) Order 2010 Certificate under Article 12 of the other owners* and/or agricultural tenants** o able to do so. eft to run.
Name of Owner / Agricultural Tenant	Address	Date Notice Server
	Address	*
	и	
Notice of the application has been published (circulating in the area where the land is sit	ed in the following newspaper ruated):	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/YYY
 I certify/ The applicant certifies that: Certificate A cannot be issued for th All reasonable steps have been take 	his application en to find out the names and addresses of ner* and/or agricultural tenant** of any e to do so. r leasehold interest with at least 7 years lef	gland) Order 2010 Certificate under Article 12 of everyone else who, on the day 21 days before the part of the land to which this application relates, bu ft to run. Planning Act 1990
Notice of the application has been publishe (circulating in the area where the land is situ	d in the following newspaper uated):	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/YYY)
12. Planning Application Require Please read the following checklist to make information required will result in your appl the Local Planning Authority has been subn	sure you have sent all the information ir lication being deemed invalid. It will not	n support of your proposal. Failure to submit all t be considered valid until all information required b
The original and 3 copies of a completed and dated application form: 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 other plans and drawings or information necessary to describe the subject of the application:	 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 the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 12 Certificate (Agricultural Holdings):

13. Declaration		O.
I/we hereby apply for planning permission/consent	t as described in th	nis form and the accompanying plans/drawings and additional 💛 🔪 🕅
genuine opinions of the person(s) giving them.	an knowledge, any	racio statea di e trac una decarate ana any opiniono grien di e tric
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		09/09/2021 (date cannot be pre-application)
14. Applicant Contact Details		15. Agent Contact Details
Telephone numbers	-	Telephone numbers
Country code: National number:	Extension number:	Country code: National number: Extension Number:
Country code: Mobile number (optional):		Country code: Mobile number (optional):
Country code: Fax number (optional):		Country code: Fax number (optional):
Email address (optional):		Email address (optional):
· · · · · · · · · · · · · · · · · · ·)	
16. Site Visit		
Can the site be seen from a public road, public foot	path, bridleway or	other public land?
If the planning authority needs to make an appoint out a site visit, whom should they contact? (<i>Please s</i>	ment to carry elect 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:		