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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:



Proud of our past. Energised for our future.

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

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. Applic	ant Name and Address	Z. Ag
Title:	Mrs First name: Jenne	Title:
Last name:	Taylor	Last na
Company (optional):	Story Homes	Compa (option
Unit:	House number: House suffix:	Unit:
House name:	Skoy Homes	House name:
Address 1:	Stoy House	Addres
Address 2:	Lords Way	Addres
Address 3:	Kungmoor Business Park	Addres
Town:	Carisle	Town:
County:	Cumbra	County
Country:		Counti
Postcode:	CA6 45L	Postco

Γitle:	First name:	
Last name:		S. Marie
Company (optional):		
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rease provide th	ss Details e full postal address of	the and the second	4. Pre-a	application Advice
Unit:	House	House	Has assista	ance or prior advice been sought from the local about this application?
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Address 2:			Please tick	n more efficiently). If the full contact details are not
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planning Application Requirements - Checklist	
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the Local Harring Authority (LPA) has been submitted	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by
The Original and 3 contact a	to the standard and drawings
completed and dated application form:	original and 3 copies* of other plans and drawings nformation necessary to describe the subject of the application:
The correct fee:	inormation necessary to describe any
*National legislation specifies that the	the form and supporting documents (a
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronicall LPAs may also accept supporting decuments in the submitted electronically.	iginal plus three copies of the form and supporting documents (a
LPAs may also accept supporting documents in electronic format by You can check your I PA's website for information	y or, the LPA indicate that a strialler humber of copies is required.
You can check your LPA's website for information or contact their pla	anning department to discuss these options.
9. Declaration	
I/we hereby apply for planning permission/consent as described in the information I/we confirm that he they are the second as th	his form and the accompanying plans/drawings and additional
information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	facts stated are true and accurate and any opinions given are the
Signed - Applicant	Or signed - Agent:
Date (DD/IVIIVI/1111):	
)4 12 (date cannot be pre-application)	
10. Applicant Contact Details	11. Agent Contact Details
10. Applicant Contact Details Telephone numbers	Telephone numbers
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Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): 12. Site Visit Can the site be seen from a public road, public footpath, bridleway or of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Other public land? Yes Other (if different from the
Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): 12. Site Visit Can the site be seen from a public road, public footpath, bridleway or out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Telephone numbers Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)