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Copeland Borough Council
The Copeland Centre,
Catherine Street, Whitehaven,
Cumbria CA28 7SJ

2. Agent Name and Address

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

Applicant Name and Address

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.

Title: "	MR First name: PAUL	Title:	MR First name: ALAW	
Last name:	MIDDLETON	Last name:	WALKER	
Company (optional):		Company (optional):		
Unit:	House suffix:	Unit:	House House number: suffix:	
House name:		House name:	ROCKLAND	
Address 1:	FESTIVAL ROAD	Address 1:	LADY HALL	
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	MILLOM	Town:	MILLOM	
County:	CUMBRIA	County:	CUMBRIA	
Country:	ENGLAND	Country:	ENGLAMS	
Postcode:	LAIR SAN	Postcode:	LAIS SHR	
3. Descri	ption of Proposed Works	-	e =	
	ribe the proposed works:			
ERECT TWO STOREY, + PORCH EXTENSION, FORM PATIO				
73				
	2			
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1 / 1	
3. Description of Proposed Works (continued)	
Has the work already started? Yes No	
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)
in res, please state when the work was completed (DD/WWV 1111).	
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or altered vehicle access proposed to or from the public highway? Yes No
Unit: House suffix: 59 House suffix:	Is a new or altered pedestrian access:
House name:	proposed to or from the public highway? Yes 📝 No
Address 1: FESTI WAL ROAD	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2:	rights of way?  If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
Town: : MILLOM	
2 224	
Postcode (optional): LAIS.5AN	
Has assistance or prior advice been sought from the local authority about this application?  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:  Reference:  Date (DD MM YYYY):  (must be pre-application submission)  Details of the pre-application advice received:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development?  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 No If Yes, please describe:  CAN CATER FOR 3 VEHICLES	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 If Yes, please provide details of the name, relationship and role

applicable, please sta	te what materials are to be used externally. Include	e type, colour and name for each material:		I
	Existing (where applicable)	Proposed	Not applicable	Don
Walls	REO FACING BRICK	WHITE ROUGHCAST THROUGHOUT		And the second
Roof	REDLAND 49" GREY COMENT TILES	REOLAND 49" GREY CEMENT TILES TO MATCH		
Windows .*	WHITE YAVE	ANTHRACKE GREY UPVC THROUGHOUT		
Doors	WHITE UPVC	ANTHRACITE GREY WRUC		
Boundary treatments e.g. fences, walls)	TRELLICE FENCE TO Nº23 HUDDLESTON ROAD	AS EXISTING, BUT REPLACE	0	
ehicle access and ard-standing	3 SPACES HARDCORE SURFACED	AS EXISTING	-	
ighting ,		E E	0	
Others blease specify)		* *	V	
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?  Yes No				
FULLY OF	TAILED PLANS, (NO 1761, S	SHEETS 1+2)		

## 11. 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 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 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\*\* NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. \* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. \*\* "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: 09/12/2022 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 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\* and/or agricultural tenant\*\* of any part of the land or building to which this application relates. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. \*\* "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Date Notice Served Address Name of Owner / Agricultural Tenant

Certify/ The applicant certifies that: Neither Certificate A or B can be is All reasonable steps have been ta	CERTIFICATE OF OWNERSHIP - CEP elopment Management Procedure) (E ssued for this application sken to find out the names and addresse of it, but I have/ the applicant has been u	RTIFICATE C ngland) Order 2010 Certificate s of the other owners* and/or ag nable to do so. left to run.		
Name of Owner / Agricultural Tenant	Address	· · · · · · · · · · · · · · · · · · ·	Date Notice Served	
Marie of Switch / Agricultural Fernant	Addiess		Date Hotice Served	
		8) ja		
4.		·		
Notice of the application has been publish	ned in the following newspaper	On the following date (which	n must not be earlier	
(circulating in the area where the land is s	ituated):	than 21 days before the date	of the application):	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
certify/ The applicant certifies that: Certificate A cannot be issued for t All reasonable steps have been tak	ten to find out the names and addresses vner* and/or agricultural tenant** of an tele to do so.  Or leasehold interest with at least 7 years le	of everyone else who, on the da y part of the land to which this a	y 21 days before the	
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:	J L	Date (DD/MM/YYYY);	
16 Mg	Straighted rights		Sate (SS/IIIIV III I)	
12. Planning Application Require Please read the following checklist to make information required will result in your app the Local Planning Authority has been substitute to riginal 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	sure you have sent all the information in dication being deemed invalid. It will no mitted.  The original and 3 copies of a design and access statement if proposed works fall within a	t be considered valid until all inf  £206  The correct fee:  PAYWA BY DIRECT T  PLEASE CONTACT  The original and 3 co  completed, dated Ow  Certificate (A, B, C or I  applicable) and Articl	FRANSFER/CARD  APPLICANT  pies of the  vnership  D – as e 12	
and drawings or information necessary to describe the subject of the application:	V	Certificate (Agricultur	ar notalings):	

13. Declaration		the second in a plant / drawings and additional			
I/we hereby apply for planning permission/conse information. I/we confirm that, to the best of my/genuine opinions of the person(s) giving them.	nt as described in th our knowledge, any	is form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the			
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/Y/YY):			
	<b>2</b> 10	09/12/2022 (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):  Email address (optional):		Country code: Fax number (optional):  Email address (optional):			
16. 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 appoi out a site visit, whom should they contact? (Pleas	ntment to carry	Agent Other (if different from the agent/applicant's details)			
If Other has been selected, please provide:					
Contact name:		Telephone number:			
9 9					
Email address:	0				