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

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 their obligations in regards to the processing of your application. Please refer to their 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:



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Copeland Borough Council tel: 0845 054 8600 The Copeland Centre, Catherine Street, Whitehaven, email: info@copeland.gov.uk Cumbria CA28 7SJ

fax: 01946 59 83 03 web: www.copeland.gov.uk

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and

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 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. Applicant Name and Address	2. Agent Name and Address
Title: MISS First name: FRANCESIA	Title: MR First name: Robert
Last name: AIREY	Last name: ATREU
Company (optional):	Company (optional):
Unit: House Suffix: House Suffix:	Unit: House House suffix:
House name: PARK ORIVE	House name: UNDERBROW
Address 1: WHITEMAVEN	Address 1: WELION
Address 2: CVNBRIA	Address 2: CARLULE
Address 3:	Address 3:
Town:	Town:
County:	County: Cornbor 1A
Country: ENGLAND	Country:
Postcode: CA 2-8 7RT	Postcode: CAS 7HW

3. Description of Proposed Works	
Please describe the proposed works:	
SIDE EXTENSION ABOVE	FIARACIE (EXISTINGI) &
REMOVE FORCH & REBUILD	GARACIE (EXISTING) & GROUND FREEDR EXTENSION
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?	
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site. Unit: House House	Is a new or aftered vehicle access proposed to or from the public highway? Yes No
number: Sumix:	Is a new or altered pedestrian access proposed to or from the public highway?
name: PARK UCIVE	Do the proposals require any diversions,
Address 1: INHITEMANEN	extinguishments and/or creation of public rights of way?
Address 2:	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:	
County: CUMBRIA	
Postcode (optional): CA2X 7RT	
	7. Trees and Hedges
Has assistance or prior advice been sought from the local	Are there any trees or hedges on your own
authority about this application?	property or on adjoining properties which are within falling distance of your proposed
you were given. (This will help the authority to deal with this	development? Yes No
application more efficiently). Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:
known, and then complete as much possible: Officer name:	
Reference:	Will any trees or hedges need
	to be removed or pruned in order to carry out your proposal?
Date (DD MM YYYY): (must be pre-application submission)	If Yes, please show on your plans which trees by giving them
Details of the pre-application advice received:	numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.
1	

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3. Description of Proposed Works	
Please describe the proposed works:	
SIDE EXTENSION ABOVE	CARACIE (EXISTING) & D GROUND FLOOR EXTENSION
REMOVE FORCH & REBUILI	D GROUND FLOOR EXTENSION
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?	(date mast be pre-application sabinission,
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
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 number: 5 House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House PARK ORIVE	proposed to or from the public highway? Yes No
Address 1: INHITEMANEN	Do the proposals require any diversions, extinguishments and/or creation of public rights of way?
Address 2:	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:	
County: CURIBRIA	
Postcode CARCY - OT	III.

	s affect existing car parking arrangements?	Yes No		
If Yes, please describe:				
means related, by birth	ole of decision-making that the process is open an	d transparent. For the purposes of this question, "r id informed observer, having considered the facts, at planning authority.		to"
Do any of the following	statements apply to you and/or agent?	No 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	i:	
If Yes, please provide o	details of their name, role and how you are related	to them.		
10. Materials If applicable, please sta	te what materials are to be used externally. Includ	e type, colour and name for each material.		
	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	RENDER + BRICKWORK	REMIDER + BRICKWERK (BUFF/MELLOW)		
Roof	SLATE	SLATE		
Windows	WHITE UPVC ALUMININ	MMITE OFVC/ ALUMINIUM.		
Doors				
Boundary treatments (e.g. fences, walls)	NIA	NIA		

Vehicle access and hard-standing				
Lighting				
Others (please specify)				
	itional information on submitted plan(s)/d rences for the plan(s)/drawing(s)/design a	rawing(s)/design and access statement? ind access statement:	Yes	No

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 2015 Certificate under Article 14 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 tonant" in section 65/8) of the Act. Signed - Applicant: Date (DD/MM/YYYY) 15/10/20 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the dar 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 Name of Owner / Agricultural Tenant Address Date Notice Served Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent:

12. Planning Application Requirements - Checklist	
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed invithe Local Planning Authority (LPA) has been submitted.	e information in support of your proposal. Failure to submit all alid. It will not be considered valid until all information required by
The original and 3 copies* of a The original and 3 completed and dated application form:	
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:	Il within a The original and 3 copies* of the
*National legislation specifies that the applicant must provide the ortotal of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by p You can check your LPA's website for information or contact their pla	ost (for example, on a CD, DVD or USB memory stick).
13. Declaration	
I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any f genuine opinions of the person(s) giving them.	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
Signed - Applicant: Or sinper	Date (DD/MM/YYYY):
	/5/10/20 (date cannot be pre-application)
14. Applicant Contact Details	15. 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):	Fmail address (notional):
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 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:	Telephone number
Contact name:	Telephone number:
Email address:	