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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

The Copeland Centre, Catherine Street, Whitehaven, email: info@copeland.gov.uk Cumbria CA28 7SJ

tel: 0845 054 8600

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 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 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 Nam	e and Add	ress	
Title:	MR	First name	DE	9~
Last name:	VAC	GHAN	/	CONTROL OF BRIDGE STATE AND A SOUTH AND A STATE CO. Section (see) and acquisit from
Company (optional):				
Unit:		House number:	7	House suffix:
House name:				
Address 1:	LAN	500W	NE (FROVE
Address 2:	HILL	CREST		
Address 3:			MARKET SERVICE TO SERVICE AND	American and American States and Company of the Com
Town:	WHI	TEHRI	IEN	•
County:	cur	1BRIP		
Country:				And the Part
Postcode:	CRIE	3 670		

2. Agent	Name and	Address	S	
Title:	MR	First name	e: DEX	TER
Last name:	MIL	LER		10 x y 1 x 2 x 10 x 10 x 10 x 10 x 10 x 10 x 1
Company (optional):			****	
Unit:		House number:	96	House suffix:
House name:	W. C.			
Address 1:	HOLL	y Br	WK	
Address 2:	THE	HIGH	URNE	25
Address 3:	Various count of Value of Control of the Samuel Count			
Town:	61417	EHR	VEV	
County:	cur	SRIA	PRESIDENCE SAME AND ADDRESS OF THE	
Country:				
Postcode:	CAZE	65A	7	

3. Description of Proposed Works				
Please describe the proposed works:				
CONSTRUCTION OF NEW SINGLE STOREY EXTENSION TO REPR OF EXISTING DURLING				
EXTENSION TO REPR	OF EXISTING DUELLING			
Has the work already started? Yes Vo				
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)			
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way			
Please provide the full postal address of the application site. House House	Is a new or altered vehicle access proposed to or from the public highway? Yes No			
number: suffix:	Is a new or altered pedestrian access			
House name:	proposed to or from the public highway? Yes No Do the proposals require any diversions,			
Address 1: LANSDOWNE GROVE	extinguishments and/or creation of public rights of way?			
Address 2: HILLCREST	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: WHITE HAVEN				
County: COMBRIA				
Postcode (optional): CA2B 670				
6. Pre-application Advice	7. Trees and Hedges			
Has assistance or prior advice been sought from the local authority about this application?	Are there any trees or hedges on your own property or on adjoining properties which			
	are within falling distance of your proposed			
If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this	development? Yes No If Yes, please mark their position on a scaled			
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			
Date (DD MM YYYY):	to be removed or pruned in order to carry out your proposal? Yes No			
(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.			

8. Parking Will the proposed work	ks affect existing car parking arrangements?	Yes N	0		
If Yes, please describe:					
means related, by birth	loyee / Member ple of decision-making that the process is open ar or otherwise, closely enough that a fair minded ar is bias on the part of the decision-maker in the loc	nd informed obs	erver, having considered the fact		
Do any of the following statements apply to you and/or agent? Yes 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 their name, role and how you are related	to them.			
10. Materials					
	ite what materials are to be used externally. Includ	e type, colour ar	nd name for each material:		,
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls	DASHED/STONE	K-RE TO BE	ND - COLOCIA RGREED		
Roof	TILES		- GREY TO H EXISTING		
Windows	WHITE - PVC		PVC - TO EXISTING		
Doors	WHITE - PVC		PVC - TO VEXISTING		
Boundary treatments (e.g. fences, walls)	NA				

10. Materials			
If applicable, please sta	ate what materials are to be used externally. Include type, colour and name for each material:		
Vehicle access and hard-standing		Y	
Lighting		>	
Others (please specify)			
Are you supplying addi	tional information on submitted plan(s)/drawing(s)/design and access statement?		No
If Yes, please state refe	rences for the plan(s)/drawing(s)/design and access statement:		
DAG Nº1	s 001, 002, 003, 004, 005		

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** 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. Or signed - Agent: Date (DD/MM/YYYY): Signed - Applicant: 4/12/20 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 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 Name of Owner / Agricultural Tenant Date Notice Served Address Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

11. Ownership Certificates and	Agricultural Land Declaration (co	ontinued)	
Town and Country Planning (Dev	CERTIFICATE OF OWNERSHIP - CER velopment Management Procedure) (El		under Article 14
certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been the land or building, or of a part of "owner" is a person with a freehold interes "agricultural tenant" has the meaning given The steps taken were:	taken to find out the names and addresse of it, but I have/ the applicant has been un t or leasehold interest with at least 7 years I	nable to do so. left to run.	gricultural tenants** of
Name of Owner / Agricultural Tenant	Address		Date Notice Served
			· ·
Notice of the application has been public (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (which than 21 days before the dat	h must not be earlier e of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been tal date of this application, was the o have/ the applicant has been unal	ken to find out the names and addresses of wner* and/or agricultural tenant** of any pole to do so. or leasehold interest with at least 7 years lea	of everyone else who, on the da part of the land to which this a ft to run.	y 21 days before the
Notice of the application has been publish circulating in the area where the land is si		On the following date (which than 21 days before the date	
Signed - Applicant:	Or signed - Agent:	1	Date (DD/MM/YYYY):

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 in the Local Planning Authority (LPA) has been submitted.	ne 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 copies* of a completed and dated application form: The original and 3 copies* of a design and access				
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:	Ill within a The original and 3 copies* of the completed, dated Ownership			
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.				
13. Declaration				
I/we hereby apply for planning permission/consent as described in tinformation. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	his 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/YYYY):			
	4/12/20 (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 codé: Mobile number (optional):	Country code: Mobile number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Email address (optional):	Email address (optional):			
	7			
16. Site Visit	,			
Can the site be seen from a public road, public footpath, bridleway or	r 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:				
Contact name:	Tata da a a completa de			
O STREET FRANCE.	Telephone number:			
	reiepnone number:			

