

Copeland Borough Council tel: 0845 054 8600 The Copeland Centre, fax: 01946 59 83 03 Catherine Street, Wintenaven email: mile a copeland govick Cumbria C428 75.) 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:	First name: YCtory Philips	Title: MR First name: Caun		
Last name:	Christie	Last name: TCYCT		
Company (optional):		Company (optional): To Archetural Service's Lid		
Unit:	House number: 7-7 House suffix:	Unit: House number: 4 House suffix:		
House name:		House name:		
Address 1:	Courten DINE	Address 1: Curwerchike		
Address 2:		Address 2: Stainban		
Address 3:	Frizinglan	Address 3:		
Town:	whitehaven	Town: KNOKINGTON		
County:	Cumbine,	County: Combra		
Country:		Country:		
Postcode:	CA2635E	Postcode: CAYYUT		
	iption of Proposed Works			
	cribe the proposed works:			
Two strey sek Extension.				

3. Description of Proposed Works (continued)		
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?	(and the special section of the special secti	
TO A LANGUAGE AND A L	(date must be pre-application submission)	
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. Unit: House number: House suffix: House name:	5. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed to or from the public highway? Is a new or altered pedestrian access proposed to or from the public highway? Yes No Do the proposals require any diversions,	
Address 1: Coccilia Dive	extinguishments and/or creation of public 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: Whicheven County: Cumbry Postcode (optional): CA26 35E		
6. Pre-application Advice 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:	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? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:	
Reference: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	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:	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 exte Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls		Rentried to Match Existing Pictorial		
Roof		welsh slate to Match Existing		
Windows		white conc		
Doors		white cove		
Boundary treatments (e.g. fences, walls)			W.	
Vehicle access and hard-standing				
Lighting				
Others (please specify)				
If Yes, please state refe	erences for the plan(s)/drawing(s)/de	31.7.3	Yes [No No

11. Ownership Certificates and	Agricultural Land Declaration				
One Certif	icate A, B, C, or D, must be completed with this application CERTIFICATE OF OWNERSHIP - CERTIFICATE A	form			
Legify/The applicant certifies that on the	relopment Management Procedure) (England) Order 2010 et day 21 days before the date of this application nobody except to which the application relates, and that none of the land to	ot myself/ 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 o part of, an agricultural holding.	r building to which the			
 "owner" is a person with a freehold interest "agricultural holding" has the meaning g 	t or leasehold interest with at least 7 years left to run. iven by reference to the definition of "agricultural tenant" in secti	on 65(8) of the Act.			
Signed - Applicant:	O-rigned - Agent	Date (DD/MM/YYYY):			
		26/K/2010			
Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 Leertify/ 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	Address	Date Notice Served			
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):			

	CERTIFICATE OF OWNERSHIP - CER opment Management Procedure) (E ared for this application on to find out the names and addresse t, but I have/ the applicant has been up the lease hold interest with at least 7 years.	TIFICATE C ngland) Order 2010 Cert s of the other owners* and nable to do so. eft to run.	
Name of Owner / Agricultural Tenant	Address		Date Notice Served
Notice of the application has been publishe (circulating in the area where the land is situ			(which must not be earlier the date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
Town and Country Planning (Develot Leertify/ The applicant certifies that: Certificate A cannot be issued for thi All reasonable steps have been taken	s application I to find out the names and addresses iter* and/or agricultural tenant** of an I to do so. leasehold interest with at least 7 years le	of everyone else who, on y part of the land to which the land to which eff to run.	the day 21 days before the
Notice of the application has been published (circulating in the area where the land is situation)			(which must not be earlier the date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
12. Planning Application Requiren Please read the following checklist to make s information required will result in your appli the Local Planning Authority has been subm 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:	ure you have sent all the information cation being deemed invalid. It will no	The correct fee The original ar completed, da Certificate (A, E applicable) and	il all information required by iii d 3 copies of the ted Ownership 3, C or D – as

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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	nis form and the accompanying plans/drawings and additional			
genuine opinions of the person(s) giving them.	noets stated and trac and accurate and any opinions given are the			
Signed - Applicant: Or signed - Agents	Date (DD/MM/YYYY):			
	2610 2020 (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 footpath, bridleway o	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:				
Contact name:	Telephone number:			
Email address:				