

15 / CO 235 / CC Council Offices, South Street
Rochford Essex SS4 1BW
http://www.rochford.gov.uk
planning.applications@rochford.gov.uk / 01702 318191

2. Agent Name and Address

Householder Application for Planning Permission for works or extension to a dwelling and for relevant demolition of an unlisted building in a conservation area

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.

1. Applicant Name and Address

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Title:	Phi Hus First name:	Title: First name:			
Last name:	Minsich	Last name: Bi Wils			
Company (optional):		Company (optional):			
Unit:	House number: 6 A House suffix:	Unit: House number: 77 House suffix:			
House name:		House name:			
Address 1:	Minsién Closé	Address 1: INLWEET ROAD			
Address 2:		Address 2:			
Address 3:		Address 3:			
Town:	RATLÉIGH	Town: Soutatal			
County:		County:			
Country:	ÉSSÉX	Country: <u>£55,£2</u>			
Postcode:	556 KSF	Postcode: S52 (LIAN)			
3. Descr	iption of Proposed Works				
Please describe the proposed works:					
12	ELH ROOF EXTENSS	LOW ON THE REAR			
	éVACCON.	The state of the s			
-	٧ ٧	RECEIVED			
		2 9 APR 2015			
		\			
		SUPPORT SERVICES			
		40 × 2000 XX 27 V4 40 × 2 × 27 XX			

·	
3. Description of Proposed Works (continued)	
Has the work already started?	
If Yes, please state when the work was started (DD/MM/YYYY):	574 Jaw 15 (date must be pre-application submission)
Has the work been completed?	
If Yes, please state when the work was completed (DD/MM/YYYY):	6 MARCH 15 (date must be pre-application submission)
4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House number: 6 A House suffix:	authority about this application? Yes No
name:	If Yes, please complete the following information about the advice
Address 1: Minsich (cosé	you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town: RAYLESCH	
County: ESSEX	Reference:
Postcode (optional): 556 856	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	
Description:	Details of the pre-application advice received:
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Trees and Hedges
Is a new or altered vehicle access	Are there any trees or hedges on your own
proposed to or from the public highway? Yes No	property or on adjoining properties which are within failing distance of your proposed
	development? Yes No
Is a new or altered pedestrian access proposed to or from the public highway? Yes No	If Yes, please mark their position on a scaled plan and state the reference number of any plan(s)/drawing(s):
Do the proposals require any diversions,	
extinguishments and/or creation of public rights of way? Yes No	
If Yes to any questions, please show details on your plans or	Will any trees or hedges need to be removed
drawings and state the reference number(s) of the plan(s)/ drawing(s)	or pruned in order to carry out your proposal? Yes No
	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.
1	141

H

&. Parking Will the proposed wor existing car parking an If Yes, please describe	ks affect (a (b) (c) (d) (d)	. Authority Employee / Member /ith respect to the Authority, I am:) a member of staff) an elected member) related to a member of staff f) related to an elected member (Yes Yes, please provide details of the name, relationsh	apply to	lo
10. Materials If applicable, please sta	ate what materials are to be used externally. Includ	de type, colour and name for each material:		
	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	inci Breiward AND IIMBÉL CLANGENG.			
Roof	ELE PICH Resi	MALLIE LE ROOF TO		
Windows	UPUL DONBLE CLAZE	INVICE DOUBLE GLAZED		
Doors	Disso	Deito		
Boundary treatments (e.g. fences, walls)			Ø	
Vehicle access and hard-standing			Ø	
Lighting			2	
Others (please specify)				
*	ditional information on submitted plan(s)/drawing(erences for the plan(s)/drawing(s)/design and acces			No
-	or Proposed Demolition Work demolish all or part of the building(s) and or struct	ure(s)?		
	√ /	A.		

12. 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. Or signed - Agent: Signed - Applicant: Date (DD/MM/YYYY): 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 owner" is a person with a freehold interest or lease fold 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):

Town and Country Planning (Dev	Agricultural Land Declaration (co CERTIFICATE OF OWNERSHIP - CER velopment Management Procedure) (E	TIFICATE C	te under Article 12	
Neither Certificate A or B can be Neither Certificate A or B can be All reasonable steps have been t the land or building, or of a part *"owner" is a person with a freehold interest		s of the other owners* and/or a nable to do so. left to run.		
Name of Corner (A. d. d. d. d. d.			The second secon	
Name of Owner / Agricultural Tenant	Address		Date Notice Served	
	/			
Notice of the application has been publis	thad in the following newspaper	On the following date (whi	ch must not be corling	
(circulating in the area where the land is	than 21 days before the da	(which must not be earlier e date of the application):		
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
			7	
 Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the have/ the applicant has been up to "owner" is a person with a freehold interest. 	aken to find out the names and addresses owner* and/or agricultural tenant** of ar	ngland) Order 2010 Certificates of everyone else who, on the case part of the land to which this left to run.	day 21 days before the	
Notice of the application has been publis	shed in the following newspaper /	On the following date (wh	ich must not be earlier	
(circulating in the area where the land is	situated):	than 21 days before the da	ite of the application):	
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
13. Planning Application Require Please read the following checklist to mainformation required will result in your apthe Local Planning Authority has been su	ke sure you have sent all the information oplication being deemed invalid. It will no	in support of your proposal. Fa ot be considered valid until all i	niture to submit all nformation required by	
The original and 3 copies of a completed and dated application form:	The original and 3 copies of a design and access statement if	The correct fee:		
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:	proposed works fall within a	Certificate (A, B, C o	Dwnership or D – as	
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:		applicable) and Art Certificate (Agricult		

i. Applicant Contact Details lephone numbers puntry code: National number:		16. Agent Co		27/405	(date cannot be pre-application
lephone numbers		16. Agent Co) i
		1	ntact Detai	İs	
nuntry code: National acceptan		Telephone numi	pers		
Duntry code: National number:	Extension number:	Country code:	National num	ber:	Extension number:
ountry code: Mobile number (optional):		Country code:	Mobile numb	er (ontional):	
		Source y code.		4.00753	7
ountry code: Fax number (optional):		Country code:	Fax number (2
nail address (optional):		Email address (o	ptional):		
		<u> </u>			
. Site Visit					
n the site be seen from a public road, public footpath	a bridleway or	other public land?	[] V		
ne planning authority needs to make an appointmen	•	——		NO (15 II)	
t a site visit, whom should they contact? (Please selec	t only one)	Agent	Applicar	nt Other (if di agent/app	ifferent from the dicant's details)
Ither has been selected, please provide: Intact name:		Tolonhono numb	A.W.		
Mrs Meas	~ ^ ^	Telephone numb	er:		<u> </u>