

## Area Planning Group

South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

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.

. Applic	ant Name and Address	2. Agent Name and Address			
Title:	MR First name: KEVIN	Title:	First name:		
ast name:	CARRUTHERS	Last name:			
Company optional):		Company (optional):	GRAY FAWDON + RIDDLE		
Jnit:	House number: 16 House suffix:	Unit:	House number: House suffix:		
House name:	WESTGARTH	House name:			
Address 1:	CENTRAL AVENUE	Address 1:	THE QUADRUS CENTRE		
Address 2:	HARTON	Address 2:	WOODSTOCK WAY		
Address 3:		Address 3:	BOLDON BUSINESS PARK		
own:	SOUTH SHIELDS	Town:	BOLDON COLLIERY		
County:	TYNE + WEAR	County:	TYNE + WEAR		
Country:		Country:	E BOLL BOLL BOLL BOLL BOLL BOLL BOLL BOL		
Postcode:	NE34 6XZ	Postcode:	NE35 9PF		

## 3. Description of Proposed Works Please describe the proposed works: Two Storey Side extension + Single storey Side + Rear Extension STO 3 9 6 / 15 HTT SION 29 APR 2015

3 Description (D. I.W.)				
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?  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.	Is a new or altered vehicle access			
Unit: House number: 16 House suffix:	proposed to or from the public highway? Yes No			
House NESTGARTH	Is a new or altered pedestrian access proposed to or from the public highway?  Yes  No			
Address 1: CENTRAL AVENUE	Do the proposals require any diversions, extinguishments and/or creation of public			
Address 2: HARTON	rights of way? Yes No			
Address 3:	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s):			
Town: SOUTH SHIELDS				
County: TYNE + WEAR				
Postcode optional): NE34 GAZ				
5. Pre-application Advice				
f 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 anown, and then complete as much possible:	development?  If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:  SEE DRGS NOS 589/1+561			
Officer name:				
Reference:				
Date (DD MM YYYY): must be pre-application submission)	Will any trees or hedges need to be removed or pruned in order to carry out your proposal?  Yes No			
Details of the pre-application advice received:	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.			
Parking  /ill the proposed works affect  xisting car parking arrangements?	9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff Do any of these			
Yes, please describe:	(b) an elected member statements apply to you? (c) related to a member of staff (d) related to an elected member			
	If Yes, please provide details of the name, relationship and role			

	Existing (where applicable)	Proposed	Not	Don't Know
Walls	RED ENCINEERING FACING BRICKWK	RED ENGINEERING FACING BRICKWK + PAREX RENDERING GIO WHITE LIGHT		
Roof	PITCHED ROOF BLUE/GREY WELSH SLATE	PITCHED ROOF - BLUEGREY WELSH SLATE FLAT ROOF SINGLE PLY MEMBRANE SLATEGREY RAL TOIZ		
Windows	WHITE PVCU	WHITE PUCU + GREY PUCU-RAL TOR		
Doors	262.56 000			
Boundary treatments (e.g. fences, walls)				
Vehicle access and nard-standing				
Lighting				
Others please specify)				
Yes, please state refere	onal information on submitted plan(s)/drawing(s)/nces for the plan(s)/drawing(s)/design and access $\frac{195}{589}$	statement:		] No

11. Ownership Certificates One Certificate A, B, C, or D, must be comp	eleted, together with the Agricultural Holdings Certifica	te with this application form
Town and Country Planning (Development Country/The applicant certifies that on the day 2	ERTIFICATE OF OWNERSHIP - CERTIFICATE A ment Management Procedure) (England) Order 2010 Ce 21 days before the date of this application nobody except no rleasehold interest with at least 7 years left to run) of any par	rtificate under Article 12 hyself/ the applicant was the
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
a miles of the set		10.
Town and Country Planning (Developm certify/ The applicant certifies that I have/the	RTIFICATE OF OWNERSHIP - CERTIFICATE B nent Management Procedure) (England) Order 2010 Cer applicant has given the requisite notice to everyone else (a the owner (owner is a person with a freehold interest or lease which this application relates.	as listed below) who, on the da
Name of Owner	Address	Date Notice Served
		A STATE OF THE STA
<u> </u>		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
Jighed Applicant.	Or Signed Figure	Date (DD/MIN/) 1111)
<ul> <li>Certify/ The applicant certifies that:</li> <li>Neither Certificate A or B can be issued</li> <li>All reasonable steps have been taken to interest or leasehold interest with at least been unable to do so.</li> <li>The steps taken were:</li> </ul>	for this application of find out the names and addresses of the other owners (owners (owners left to run) of the land or building, or of a part of it,	ner is a person with a freehold but I have/ the applicant has
		and the second s
Name of Owner	Address	Date Notice Served
W 19 A		A CAST A MET
Notice of the application has been published in	the following newspaper On the following date	e (which must not be earlier
(circulating in the area where the land is situate	ed): than 21 days before t	he date of the application):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
	11	

Town and Country Planning (Developm I certify/ The applicant certifies that: Certificate A cannot be issued for this ap All reasonable steps have been taken to	PRTIFICATE OF OWNERSHIP - CE ment Management Procedure) ( opplication of find out the names and address fowner is a person with a freehold in	es of everyone else who, on the day 21 days before the
Notice of the application has been published in (circulating in the area where the land is situated	the following newspaper	On the following date (which must not be earlier than 21 days before the date of the application):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
Town and Country Planning (Developme	nd Declaration - You Must Comp	ngland) Order 2010 Certificate under Article 12 lete Either A or B
(B) I have/ The applicant has given the requisite a before the date of this application, was a tenant as listed below:  Name of Tenant	notice to every person other than of an agricultural holding on all o	or part of the land to which this application relates,
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
The original and 3 copies of a completed and 3 copies of a completed and dated application form:  The original and 3 copies of a plan which dentifies the land to which the application relates drawn to an identified scale.	ou have sent all the information in being deemed invalid. It will no	The correct fee:  The original and 3 copies of the

Signed - Applic	ant:	Or signed - Agent:		Da	te (DD/MM/YYYY):	
er Sloter ere In of the bey	Picymboth of wastancy:				., ., 5	(date cannot be pre-application
15. Applicar	t Contact Details		16. Agent Co	ontact Detail	s	Reference and L
Telephone num	bers		Telephone num	bers		
Country code:	National number:	Extension number:	Country code:	National numb		Extension number:
Country code:	Mobile number (optional):		Country code:	Mobile number	er (optional):	
Country code:	untry code: Fax number (optional):		Country code:	E: Fax number (optional):		
Email address (	Email address (optional):		Email address (	optional):		
			K MANAGE			
17. Site Visi		managed and the second of the		ALL POTENTIAL PROPERTY.		10 400
If the planning	seen from a public road, public authority needs to make an app whom should they contact? (Ple	ointment to carry	Agent	? Yes Applicar		lifferent from the olicant's details)
If Other has bee	n selected, please provide:					
Contact name:		Survival of the second	Telephone num	ber:	olik uga landa	60 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -
Email address:		ochezan (* en a en aca)	an xedes es	ASTURBES VISTORIA		