

Planning Group

2. Agent Name and Address

First name:

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.

First name:

1. Applicant Name and Address

Title:

Last name

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

Title:

Last Harris	IEMERAUN	Lustrianici	
Company (optional):		Company (optional):	
Unit:	House number: 17 House suffix:	Unit: House number: House suffix:	
House name:		House name:	
Address 1:	CALLUM DRIVE	Address 1:	
Address 2:		Address 2:	
Address 3:	· .	Address 3:	
Town:	BOUTH SHIELDS	Town:	
County:	TYNE & WEAR	County:	
Country:	1	Country:	
ostcode:	NE34 GTZ	Postcode:	
B. Description of Proposed Works Please describe the proposed works:			
SINGLE STOREY EXTENSION			
TO REAR & SIDE COUNCE			
15 DEC 2015			
ST1174/15HFUL AREA PLANNING			
		SDate:: 2013-01-09 #\$ SRevision: 4684 \$	

- (continued)	
. Description of Proposed Works (continued)	÷ 10
las the work already started?	(date must be pre-application submission)
Yes, please state when the work was started (DD/MM/YYYY):	
las the work already been completed? Yes No	(date must be pre-application submission)
Yes, please state when the work was completed (DD/MM/YYYY):	5. Pedestrian and Vehicle Access, Roads and Rights of Way
- Liver Dotails	5. Pedestrian and Venicle access, not as
Please provide the full postal address of the application site. House	Is a new or altered vehicle access proposed to or from the public highway? Yes No
Unit: House number: 17 House suffix:	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
House name:	Do the proposals require any diversions, extinguishments and/or creation of public
Address 1: CALLUM DRIVE	rights of way?
Address 2:	If Yes to any questions, please show details on your plan(s)/ drawings and state the reference number(s) of the plan(s)/ drawing(s):
Address 3:	75
County: TYNE & WEAR	340 es 2
Postcode (optional):	7. Trees and Hedges
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:	development? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
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 or the plan(s)/
Details of the pre-application advice received:	drawing(s) and indicate the scale.
Ξ.	
	9. Authority Employee / Member
8. Parking Will the proposed works affect Yes No	With respect to the Authority, I am: (a) a member of staff Do any of these statements apply to you?
Will the proposed works affect existing car parking arrangements?	() an elected member
If Yes, please describe:	(c) related to a member of standard member
(e a	If Yes, please provide details of the name, relationship and role
	*
	\$Date:: 2013-01-09 #\$ \$Revision: 4684 \$

g - 43 °	Existing (where applicable)	1 K. J.	Proposed	Not applicable	Doi
Walls			BRICKS TO MATCH House Brick		
Roof			TILES TO MATCH HOUSE ROOF THE		
Windows			VPVC		
Doors			VEVE		
Boundary treatments (e.g. fences, walls)					
ehicle access and lard-standing				M	
ghting	an sa	27	\$2 27 - 37 - 380	Image: Control of the	
thers lease specify)				F	2
	nal information on submitted ces for the plan(s)/drawing(s)/c		J	Yes 🔽	No

	Manual Pro-	
11. Ownership Certificates and	Agricultural Land Declaration	adings Cortificate with this application form
One Certificate A, B, C, or D, must be	completed, together with the Agricultural 1	oldings Certificate with this application form
	CERTIFICATE OF OWNERS.	u. a. I. anno Cortificate under Article 12
Town and Country Planning (De	velopment Management Procedure) (England the day 21 days before the date of this application on the test or leasehold interest with at least 7 years lef	nobody except myself/ the applicant was the
owner (owner is a person with a free hold in	nterest or leasehold interest with at least 7 years left one of the land to which the application relates it or D, as appropriate, if you are the sole owne	s, or is part of, an agricultural holding
NOTE: You should sign Certificate B, C	one of the land to which the application relates in or D, as appropriate, if you are the sole owner s part of, an agricultural holding.	rol the land of bullands to seems and
* "owner" is a person with a freehold intere	s part of, an agricultural holding. st or leasehold interest with at least 7 years left to regiven by reference to the definition of "agricultural	tenant" in section 65(8) of the Act.
** "agricultural holding" has the meaning	Or signed - Agent:	Date (DD/MM/YYYY):
Signed - Applicant:	Of signed Agend	2/12/201
		12 201
6	CERTIFICATE OF OWNERSHIP - CERTIFICA	
application relates.	st or leasehold interest with at least 7 years left to r eiven in section 65(8) of the Town and Country Plant Address	* of any part of the land or building to which this run. ning Act 1990
** "agricultural tenant" has the meaning g Name of Owner / Agricultural Tenant	Address	Date Notice Served
Name of Owner, rights		
g = 3=0		
	414	e e e
		3.
(a)		**** · · · · · · · · · · · · · · · · ·
		Date (DD/MM/YYYY):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

Town and Country Planning (D) I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been the land or building, or of a par * "owner" is a person with a freehold intended.	d Agricultural Land Declaration (of CERTIFICATE OF OWNERSHIP - CE evelopment Management Procedure) (lessued for this application taken to find out the names and addressed to fit, but I have/ the applicant has been usest or leasehold interest with at least 7 years given in section 65(8) of the Town and Countered to the test of the Town and Countered the test of the test of the Town and Countered the test of	RTIFICATE C England) Order 2010 Certificat es of the other owners* and/or a unable to do so. left to run.	
		2	Date Notice Served
Name of Owner/ Agricultural Tenant	Address		Date Notice Served
		100	
Notice of the application has been publis	thad in the following newspaper	On the following date (whic	h must not be earlier
(circulating in the area where the land is	situated):	than 21 days before the date	of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYY
зідпесі - Арріксанк.	Of signed - Agent.	1	
date of this application, was the or have/ the applicant has been unal "owner" is a person with a freehold interest	ken to find out the names and addresses on wner* and/or agricultural tenant** of any	part of the land to which this a ft to run.	y 21 days before the pplication relates, but
otice of the application has been publish rculating in the area where the land is sit	ed in the following newspaper	On the following date (which than 21 days before the date	must not be earlier of the application):
gned - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
		,	
e. Planning Application Require tase read the following checklist to make ormation required will result in your apple Local Planning Authority has been subrectional and 3 copies of a mpleted and dated application form: e original and 3 copies of a plan which ntifies the land to which the application ates drawn to an identified scale dishowing the direction of North:	sure you have sent all the information in lication being deemed invalid. It will not	support of your proposal. Failu be considered valid until all info The correct fee: The original and 3 cop completed, dated Owi Certificate (A, B, C or D	ies of the
original and 3 copies of other plans drawings or information necessary to cribe the subject of the application:		The original and 3 cop completed, dated Artio (Agricultural Holdings)	cle 12 Certificate 🗀

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 genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):
14. Applicant Contact Details Telephone numbers Country code: National number: Extension number:	Telephone numbers Country code: National number: **Extension number:**
Country code: Mobile number (optional): Country code: Fax number (optional):	Country code: Mobile 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 of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	or other public land? Yes No Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide: Contact name:	Telephone number:
Email address:	