

Planning Group

2. Agent Name and Address

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

First name:

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

First name: John

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.

Last name: LAMB.	Last name:				
Company (optional):	Company (optional):				
Unit: House number: 12 House suffix:	Unit: House number: House suffix:				
House name:	House name:				
Address 1: LANGYDALE WHY	Address 1:				
Address 2:	Address 2:				
Address 3:	Address 3:				
Town: 5757 Border	Town:				
County: TYNB & WEAR	County:				
Country:	Country				
Postcode:	Postcode:				
3. Description of Proposed Works					
Please describe the proposed works:	310115/16 HFUL				
S'INGLE STOREY EXTENSION TO RETHR 10 FEB 2016					
	10 FEB 2016				
	\$Date:: 2013-01-09 #\$ \$Revision: 4684 \$				

3. Description of Proposed Works (continued) Has the work already started? Yes No	\ \ 8
If Yes, please state when the work was started (DD/MM/YYYY):	
Has the work already been completed?	(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.	5. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access
Unit: House number: 12 House suffix: House name: Address 1: LANGDALE WAY Address 2: Address 3:	proposed to or from the public highway? Is a new or altered pedestrian access proposed to or from the public highway? Do the proposals require any diversions, extinguishments and/or creation of public rights of way? 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: EAST BULDON	
County: TYNE & WEAR,	
Postcode (optional):	
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: Reference: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	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: 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? 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

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls		BRICKS TO MAT HOUSE BRICK	rest	
Roof		TILES TO MATICH HOUSE ROOF TILE		
Windows		WPVL		
Doors		VPYC		
Boundary treatments (e.g. fences, walls)			[7 /	
Vehicle access and hard-standing				,
Lighting				
Others (please specify)	A B -			
	ional information on submitted plan(s)/d ences for the plan(s)/drawing(s)/design ar	_	Yes	No

11. Ownership Certificates and	Agricultural I	Land Declaration	
One Certificate A, B, C, or D, must b		gether with the Agricultural Holdings (E OF OWNERSHIP - CERTIFICATE A	Certificate with this application form
Town and Country Planning (De I certify/The applicant certifies that on the owner (owner is a person with a freehold is which the application relates, and that notes in the important of the property of the land is, or in the series of the land is, or in the land is a person with a freehold interest of the land in the	ne day 21 days be nterest or leaseho one of the land to or D, as approp s part of, an agri	o which the application relates is, or is pa riate, if you are the sole owner of the la icultural holding. terest with at least 7 years left to run.	except myself/ the applicant was the of any part of the land or building to refer to f, an agricultural holding** and or building to which the a section 65(8) of the Act.
Signed - Applicant:		Or signed - Agent:	Date (DD/MM/YYYY):
×			4/2/16
21 days before the date of this application relates. * "owner" is a person with a freehold intere ** "agricultural tenant" has the meaning g	on, was the ownerst or leasehold int	erest with at least 7 years left to run.	part of the land or building to which this
Name of Owner / Agricultural Tenant		Address	Date Notice Served
Signed - Applicant:		Or signed - Agent:	Date (DD/MM/YYYY):

Town and Country Planning (Dev I certify/ The applicant certifies that: Neither Certificate A or B can be in the land or building, or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or building or of a part of the land or buil	CERTIFICATE velopment Manage issued for this app aken to find out the of it, but I have/the of to r leasehold inter-	OF OWNERSHIP - CERT gement Procedure) (En plication ne names and addresses ne applicant has been un rest with at least 7 years le	of the able to	TE C) Order 2010 Certificate other owners* and/or ago o do so.	
Name of Owner/ Agricultural Tenant		Address			Date Notice Served
Notice of the application has been publish	hed in the followir	ng newspaper		he following date (which	
(circulating in the area where the land is s	situated):		thar	n 21 days before the date	e of the application):
Signed - Applicant:		Or signed - Agent:			Date (DD/MM/YYYY):
16		A-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2-2			
Town and Country Planning (Develoretify/ The applicant certifies that: Certificate A cannot be issued for the All reasonable steps have been taked at the order of this application, was the own have/ the applicant has been unable "owner" is a person with a freehold interest of "agricultural tenant" has the meaning give The steps taken were:	this application ken to find out the wner* and/or agri ole to do so. or leasehold interes	names and addresses o cultural tenant** of any st with at least 7 years left	f every part of	Order 2010 Certificate one else who, on the da the land to which this a	y 21 days before the
Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): On the following date (whice the land is situated): than 21 days before the date			he following date (which 21 days before the date		
Signed - Applicant:	Or	signed - Agent:		100	Date (DD/MM/YYYY):
12. Planning Application Requirements - Checklist					
Please read the following checklist to make information required will result in your app he Local Planning Authority has been subrithe original 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 elates 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	e sure you have sel blication being dec mitted. The origina design and proposed v conservation	nt all the information in emed invalid. It will not al and 3 copies of a d access statement if works fall within a on area or itage Site, or relate to a	suppo be con	The correct fee: The original and 3 corcompleted, dated Owcertificate (A, B, C or I	ormation required by Dies of the rhership O - as applicable):
escribe the subject of the application:				completed, dated Art (Agricultural Holdings	icie 12 Certificate 🔲]

13. Declaration I/we hereby apply for planning permission/conse information. I/we confirm that, to the best of my/genuine opinions of the person(s) giving them. Signed - Applicant:	ent as described in th our knowledge, any Or signed - Agent:	facts stated are tr	ue and accurate an	s/drawings and a d any opinions of	given are the (date cannot be
×1				طالدار	pre-application)
14. Applicant Contact Details)	15. Agent Co	ontact Details		
Telephone numbers		Telephone num	bers		
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 (opti	onal):	
Email address (optional):		Email address (c	optional):		
16. Site Visit Can the site be seen from a public road, public for	•	other public land		No	
If the planning authority needs to make an appoil out a site visit, whom should they contact? (Please		Agent	Applicant	Other (if d	ifferent from the blicant's details)
If Other has been selected, please provide:		P04-04 1 1 20			
Contact name:		Telephone numl	ber:		
Email address:	167.5				