

ST0805/16 HFUL

## **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.

Applicant Name and Address			2. Agent P	2. Agent Name and Address			
Title: MR+M		+JOANN E	Title:	DR.	First name:	JAMES	
ast name: Bo	IYES and OLIVER	?	Last name:	MAR.	TIN		
Company (optional):			Company (optional):				
Jnit:	House number:	House suffix:	Unit:		House number:	2 House suffix:	
House			House name:				
Address 1: E	SKINE ROAD		Address 1:	MAG	SDEN BO	OAO	
Address 2:			Address 2:				
Address 3:		4,	Address 3:				
Town: So	SOUBLY HTU		Town:	SOUT	H SHIER	>5	
County:			County:				
Country:		3	Country:				
Postcode: NE	33 2TO		Postcode:	NE3	4 60F		
Please describe the	FLOOP EXTEN		NOFF	FROF	tet/		

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 submiss
Has the work already been completed?	
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 V
Please provide the full postal address of the application site.  House House	Is a new or altered vehicle access proposed to or from the public highway?  Yes
Unit: number: suffix:	Is a new or altered pedestrian access proposed to or from the public highway?
House name:	Do the proposals require any diversions,
Address 1:	extinguishments and/or creation of public rights of way?
Address 2:	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:	
County:	
Postcode (optional):	
(optional).	7. Trees and Hedges
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:	If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Oncer name.	
Reference:	
	Will any trees or hedges need to be removed or pruned in
Date (DD MM YYYY): (must be pre-application submission)	order to carry out your proposal?  If Yes, please show on your plans which trees by giving them
Details of the pre-application advice received:	numbers e.g. T1, T2 etc, state the reference number of the plant drawing(s) and indicate the scale.
8. Parking	9. Authority Employee / Member
Will the proposed works affect existing car parking arrangements?	With respect to the Authority, I am: (a) a member of staff  Do any of these
If Yes, please describe:	(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	Do Kn
Walls	RED/REDUR BRICKS	RED/BROWN BRIES to dorely match existing			
Roof	State	SamaGI			
Windows	White Pik	White Pic			I
Doors	u	м			
Boundary treatments (e.g. fences, walls)	,				
Vehicle access and hard-standing					
Lighting					
Others (please specify)					
Are you supplying ac If Yes, please state re	dditional information on submitted plan(s)/d ferences for the plan(s)/drawing(s)/design a	lrawing(s)/design and access statement? and access statement:	Yes		

1. Ownership Certificates and Agric	cultural Land Declaration	
One Certificate A. B. C. or D. must be com	pleted, together with the Agricultural Holdings Co ERTIFICATE OF OWNERSHIP - CERTIFICATE A	ertificate with this application form
Town and Country Planning (Develop certify/The applicant certifies that on the day wner (owner is a person with a freehold interest which the application relates, and that none of IOTE: You should sign Certificate B, C or D, pplication relates but the land is, or is part	ment Management Procedure) (England) Order 2 21 days before the date of this application nobody e or leasehold interest with at least 7 years left to run) of the land to which the application relates is, or is part as appropriate, if you are the sole owner of the land	any part of the land or building to of, an agricultural holding** nd or building to which the
* "agricultural holding" has the meaning given t Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYY
signed - Applicant.		Stex IL
pplication relates.	as the owner* and/or agricultural tenant** of any page the later set with at least 7 years left to run.	art of the land or building to which
certify/ The applicant certifies that I have/the days before the date of this application, we pplication relates.		art of the land or building to which
certify/ The applicant certifies that I have/the days before the date of this application, we application relates. "owner" is a person with a freehold interest or less a gricultural tenant" has the meaning given in	e applicant has given the requisite notice to everyone as the owner* and/or agricultural tenant** of any page as a section 65(8) of the Town and Country Planning Act 19	art of the land or building to which
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CERTIFICATE OF OWNERSH	IP - CERTIFICATE C	
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n in section 65(8) of the Town ar	nd Country Planning Act 1990	
	Addross	Date Notice Serve
	Address	- Julie House Serve
	* .	
ed in the following newspaper uated):	On the following than 21 days before	date (which must not be earlier ore the date of the application):
Or signed - Ago	ent:	Date (DD/MM/YYY
nis application en to find out the names and a ner* and/or agricultural tenar e to do so. r leasehold interest with at leas	ddresses of everyone else who nt** of any part of the land to v	o, on the day 21 days before the
ed in the following newspaper uated):	On the following than 21 days before	date (which must not be earlier ore the date of the application):
Or signed - Age	ent:	Date (DD/MM/YYY
mants - Chacklist		
sure you have sent all the info lication being deemed invalid	ormation in support of your pr . It will not be considered vali	oposal. Failure to submit all d until all information required b
The original and 3 copi design and access state	ement if	ect fee:
conservation area or	The original complete	nal and 3 copies of the ed, dated Ownership ee (A, B, C or D - as applicable):
	complete	nal and 3 copies of the ed, dated Article 12 Certificate ural Holdings):
	CERTIFICATE OF OWNERSH opment Management Procesued for this application en to find out the names and a it, but I have/ the applicant has releasehold interest with at least in in section 65(8) of the Town and it is application en to find out the names and a green's and/or agricultural tenantes to do so. In leasehold interest with at least in in section 65(8) of the Town and it is section 65(8) of the Town and it is section 65(8) of the Town and it is sure you have sent all the information being deemed invalid mitted.  Or signed - Age of the Town and it is sure you have sent all the information being deemed invalid mitted.  The original and 3 copic design and access state proposed works fall with conservation and access the proposed works fall with conservation are worked Heritage Site, or World	ed in the following newspaper unated:  Or signed - Agent:  CERTIFICATE OF OWNERSHIP - CERTIFICATE D lopment Management Procedure) (England) Order 2010 nis application en to find out the names and addresses of everyone else where a substitute of the land to release hold interest with at least 7 years left to run.  Or signed - Agent:  CERTIFICATE OF OWNERSHIP - CERTIFICATE D lopment Management Procedure) (England) Order 2010 nis application en to find out the names and addresses of everyone else where a moder agricultural tenant** of any part of the land to release to do so.  or leasehold interest with at least 7 years left to run. n in section 65(8) of the Town and Country Planning Act 1990  Or signed - Agent:  On the following newspaper under the following newspaper of the land to release the following newspaper of the land to relate the following newspaper or signed and access statement if proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the information in support of your proposed works are all the inf

Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
		<u> </u>		date cannot ore-applicati
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
National Hamber.		0191	4547321	7
Country code: Mobile number (optional):		Country code:	Mobile number (optional):	J └── ┐
Country code: Fax number (optional):		Country code:	Fax number (optional):	
Email address (optional):		Email address (	The state of the s	<u> </u>
		drjamestr	nartinanoh tedagmaid.com	и
16. Site Visit				
Can the site be seen from a public road, public		r other public land	? Yes No	
If the planning authority needs to make an app out a site visit, whom should they contact? (Plea	ointment to carry ase select only one)	Agent	Applicant Other (if different agent/application)	
If Other has been selected, please provide:				
Contact name:		Telephone num		