

PLAN NO.		
DATE LODGED		
RECEIPT NO.		FEE RECEIVED
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KIRKLEES COUNCIL - RESPONDING TO THE RECESSION VALIDATION CHECKLIST: SUPPLY 1 COPY (PLUS THE ORIGINAL)		

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990

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.

1. Applicant Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First name:	<input type="text" value="EDWARD"/>	Surname:	<input type="text" value="SISSON-PELL"/>		
Company name:	<input type="text"/>						
Street address:	<input type="text" value="78"/>			Country Code	National Number	Extension Number	
	<input type="text" value="Red Lane"/>	Telephone number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
	<input type="text" value="Meltham"/>	Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Town/City:	<input type="text" value="Holmfirth"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
County:	<input type="text" value="Kirklees"/>	Email address:	<input type="text"/>				
Country:	<input type="text" value="United Kingdom"/>						
Postcode:	<input type="text" value="HD9 5LJ"/>						
Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No							

2. Agent Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Andrew"/>	Surname:	<input type="text" value="Smith"/>		
Company name:	<input type="text" value="VALLEY PROPERTIES"/>						
Street address:	<input type="text" value="7 Holmfirth Road"/>			Country Code	National Number	Extension Number	
	<input type="text" value="Meltham"/>	Telephone number:	<input type="text"/>	<input type="text" value="01484 854100"/>	<input type="text"/>	<input type="text"/>	
	<input type="text"/>	Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Town/City:	<input type="text" value="Holmfirth"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
County:	<input type="text" value="West Yorkshire (Met County)"/>	Email address:	<input type="text" value="vproperties@supanet.com"/>				
Country:	<input type="text" value="United Kingdom"/>						
Postcode:	<input type="text" value="HD9 4AA"/>						

3. Description of Proposed Works

Please describe the proposed works:

Has the work already been started without planning permission? Yes No

4. Site Address Details

Full postal address of the site (including full postcode where available)

House: Suffix:

House name:

Street address:

Town/City:

County:

Postcode:

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:

Northing:

Description:

5. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway?

Yes No

Is a new or altered pedestrian access proposed to or from the public highway?

Yes No

Do the proposals require any diversions, extinguishment and/or creation of public rights of way?

Yes No

6. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes No

7. Trees and Hedges

Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development?

Yes No

Will any trees or hedges need to be removed or pruned in order to carry out your proposal?

Yes No

8. Parking

Will the proposed works affect existing car parking arrangements?

Yes No

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

Do any of these statements apply to you?

Yes No

10. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

Yes No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

The agent The applicant Other person

11. Materials

Please state what materials (including type, colour and name) are to be used externally (if applicable):

Walls - description:

Description of *existing* materials and finishes:

Description of *proposed* materials and finishes:

Roof - description:

Description of *existing* materials and finishes:

Description of *proposed* materials and finishes:

11. (Materials continued)

Windows - description:

Description of *existing* materials and finishes:

WHITE UPVC

Description of *proposed* materials and finishes:

WHITE UPVC

Doors - description:

Description of *existing* materials and finishes:

WHITE UPVC

Description of *proposed* materials and finishes:

WHITE UPVC

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

15-062-01 SURVEY - AS EXISTING
15-062-03 PLANNING - AS PROPOSED
LOCATION PLAN

12. Certificates (Certificate B)

Certificate of Ownership - Certificate B

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

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 (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) and/or agricultural tenant (*"agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990*) of any part of the land or building to which this application relates.

Owner/Agricultural Tenant	Date notice served
Name: MRS E.M. SHEARD	16/10/2015
Number: 27 Suffix: House name:	
Street: GOSPORT LANE	
Locality: OUTLANE	
Town: HUDDERSFIELD	
Postcode: HD3 3SP	
Title: Mr First name: ANDREW Surname: SMITH	
Person role: Agent Declaration date: 15/10/2015 <input checked="" type="checkbox"/> Declaration made	

13. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Date 15/10/2015