

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

Privacy Notice

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Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



APPLICATION NO.	
DATE LODGED	
RECEIPT NO.	FEE RECEIVED
CARD	OTHER
KIRKLEES COUNCIL VALIDATION CHECKLIST	SUPPLY 1 COPY (PLUS THE ORIGINAL)

PLANNING - PO Box B93, Civic Centre 3, Huddersfield, HD1 2JR Tel: 01484 414746 E-mail : dc.admin@kirklees.gov.uk

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applicant Name and Address

Title:	MRS	First name:	SOFIA
Last name:	BIBI		
Company (optional):			
Unit:	House number:	House suffix:	
House name:	6 THE ARBORE		
Address 1:	FARTOWN		
Address 2:	HUDDERSFIELD		
Address 3:	HD2 1BL		
Town:			
County:			
Country:			
Postcode:			

2. Agent Name and Address

Title:	MR	First name:	CHRIS
Last name:	WEST		
Company (optional):			
Unit:	House number:	House suffix:	
House name:	7 BROOKSIDE		
Address 1:	SLAITHWAITE		
Address 2:	HUDDERSFIELD		
Address 3:	HD7 5BZ		
Town:			
County:			
Country:			
Postcode:			

3. Description of Proposed Works

Please describe the proposed works:

2 STOREY FRONT / SIDE EXTENSION PART
SINGLE STOREY REAR EXTENSION & SIDE

Has the work already started?

☐ Yes ☒ No

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

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1: G THE GROVE

Address 2: FARTOWN

Address 3: HUDDERSFIELD

Town: HD2 1BL

County:

Postcode (optional):

6. Pre-application Advice

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

☐ Yes ☒ No

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 as possible: ☐

Officer name:

Reference:

Date (DD MM YYYY):
(must be pre-application submission)

Details of the pre-application advice received:

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, extinguishments and/or creation of public rights of way?

☐ Yes ☒ No

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):

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

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?

☐ Yes ☒ No

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?

☐ Yes

☒ No

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

Do any of these statements apply to you?

☐ Yes

☒ No

If Yes, please provide details of the name, relationship and role

10. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	BRICKWORK GROUND FLOOR RENDER FIRST FLOOR	BRICKWORK GROUND FLOOR RENDER FIRST FLOOR	☐	☐
Roof	FLAT BLUE/GREY ROOF TILES	FLAT BLUE/GREY ROOF TILES	☐	☐
Windows	WHITE PVC	WHITE PVC	☐	☐
Doors	WHITE PVC	WHITE PVC	☐	☐
Boundary treatments (e.g. fences, walls)			☒	☐
Vehicle access and hard-standing			☒	☐

10. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

Lighting			☒	☐
Others (please specify)		CLEAR GLAZING TO ROOF DECK 1000MM HIGH BOUNDARY TO NOS 1600MM HIGH OBSCURED GLASS	☐	☐

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:

DRAWINGS SB02, SB03, SB01

11. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form

CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Redacted

12/05/21

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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Redacted

12/05/21

(date cannot pre-application)

14. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

15. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

16. 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)

☒ Agent

☐ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide: