HPK/2011/0594



## High Peak Borough Council

## working for our community

2. Agent Name and Address

First name:

PH ANCHITECTURE

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.

MN + MN First name:

ROUNKE

1. Applicant Name and Address

Title:

Last name: Company

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

Title:

Last name:

Company

Unit: House number: 10 House suffix:	Unit:	House number: 7 House suffix:
House name:	House name:	
Address 1: HENON CLOSE	Address 1:	LANKWOOD CLOSE
Address 2:	Address 2:	(AMENU)K
Address 3:	Address 3:	
Town: GLOSSOP	Town:	STALY BRIDGE
County: DENRYSHIRE	County:	CHESHINE
Country:	Country:	
Postcode: SK13 8UH	Postcode:	PICIE 3NT
3. Description of Proposed Works		
Please describe the proposed works:		
SINCLE STORBY REAL EXTENSION	J	
		\$Date:: 2010-09-10 #\$ \$Revision: 2998 \$

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 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	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or altered vehicle access
Unit: House number: 10 House suffix:	proposed to or from the public highway? Yes No
House name:	proposed to or from the public highway?  Do the proposals require any diversions,
Address 1: HENON CLUSE	extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:	drawing(s):
Town: GLOSSOP	
County:	
Postcode (optional): SK13 9UH	
6. Pre-application Advice	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:  Officer name:	development?  If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
2-6	20 1
Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	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.
9 Parking	Q Authority Employee / Member
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  If Yes, please provide details of the name, relationship and role

	Existing (where applicable) Proposed		Not applicable	Don't Know
Walls	MOCK STONE	MOCIL STONE		
Roof	MANUEY MODERN TILES	MANUER MODERNY TILES		
Windows	UPVC	υρνς		
Doors	UPVC	UPVC		
Boundary treatments (e.g. fences, walls)	NIA	NIA		
Vehicle access and hard-standing	NA	N/A		
Lighting	MA	NIA		
Others (please specify)	NIA	NB		
	itional information on submitted plan(s)/drawing rences for the plan(s)/drawing(s)/design and acce		es [	No

	completed, together with the Agricultural Holdings Co CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
certify/The applicant certifies that on the	relopment Management Procedure) (England) Order 2 e day 21 days before the date of this application nobody e terest or leasehold interest with at least 7 years left to run) of	xcept myself/ the applicant was the any part of the land or building to
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		20/10/2011
Lcertify/ The applicant certifies that I have	relopment Management Procedure) (England) Order 2 re/the applicant has given the requisite notice to everyon h, was the owner (owner is a person with a freehold interesting to which this application relates.	e else (as listed below) who, on the day
Name of Owner	Address	Date Notice Served
		Name of the last o
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
Neither Certificate A or B can be a All reasonable steps have been to be unable to do so.  The steps taken were:	ssued for this application aken to find out the names and addresses of the other own at least 7 years left to run) of the land or building, or of a par	ners (owner is a person with a freehold rt of it , but I have/ the applicant has
		/
Name of Owner	Address	Date Notice Served
Notice of the application has been publis (circulating in the area where the land is	hed in the following newspaper On the following than 21 days by	ing date (which must not be earlier pefore the date of the application):
teresiating in the area where the land is	The state of the s	The state of the s
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

Certify/ The applicant certifies that:     Certificate A cannot be issued for the All reasonable steps have been taked date of this application, was the own.	CERTIFICATE OF OWNERSHIP - CER lopment Management Procedure) (E his application en to find out the names and addresses	ngland) Order 2010 Certificate under Ar s of everyone else who, on the day 21 days sterest or leasehold interest with at least 7 years	before the
Notice of the application has been publishe (circulating in the area where the land is situ	d in the following newspaper uated):	On the following date (which must no than 21 days before the date of the ap	t be earlier plication):
Signed - Applicant:	Or signed - Agent:	Date (DI	D/MM/YYYY):
Town and Country Planning (Develor Agriculture (A) None of the land to which the application Signed - Applicant:	al Land Declaration - You Must Comple	gland) Order 2010 Certificate under Art ete Either A or B I holding.  Date (D	D/MM/YYYY):
		1 201	1/201
(B) I have/The applicant has given the requi before the date of this application, was a ter as listed below:	isite notice to every person other than nant of an agricultural holding on all or	myself/ the applicant who, on the day 21 of part of the land to which this application	lays relates,
Name of Tenant	Address	Date No.	otice Served
Signed - Applicant:	Or signed - Agent:	Date (D	D/MM/YYYY):
		and the same of th	
13. Planning Application Requiren Please read the following checklist to make s information required will result in your applithe Local Planning Authority has been subm The original and 3 copies of a completed and dated application form:  [The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:  [The original and 3 copies of other plans and drawings or information persessant to	sure you have sent all the information i cation being deemed invalid. It will no	The correct fee:  The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as appl	licable):
and drawings or information necessary to describe the subject of the application:	6	completed, dated Article 12 Cer (Agricultural Holdings):	

information. Signed - Applicant:		Or signed - Agent:			Date (DD/MM/YYYY	(date cannot be pre-application
15. Applicant Con Telephone numbers Country code: Natio	tact Details	Extension number:	16. Agent Co Telephone num Country code:			Extension number:
Country code: Mobi	e number (optional):		Country code:		mber (optional):	
Country code: Fax n	umber (optional):		Country code:		er (optional):	
Email address (optiona	():		Email address (	optional):		
17. Site Visit Can the site be seen fro If the planning authorit out a site visit, whom s If Other has been select Contact name:	y needs to make an app hould they contact? (Ple	pointment to carry	Agent Telephone num	Appli		different from the oplicant's details)
			Telephone num	ber:		