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.

1. Applicant Name and Address	2. Agent Name and Address			
Title: WRAWS First name: A	Title: First name:			
Last name: BROWN	Last name:			
Company (optional):	Company (optional):			
Unit: House number: 568 House suffix				
House name:	House name:			
Address 1: ALLERTON ROM	Address 1:			
Address 2:	Address 2:			
Address 3:	Address 3:			
Town: LIVERPOOL	Town:			
County:	County:			
Cantry:	Country:			
Postcode: L/8 9UZ	Postcode:			
3. Description of Proposed Works				
Please describe the proposed works:				
SINGLE STOREY SIDE & REAR EXTENSION				
10 JUN 2016				

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?				
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: 568 House suffix:	proposed to or from the public highway? Is a new or altered pedestrian access			
House name:	proposed to or from the public highway? Do the proposals require any diversions,			
Address 1: ALLERTOH RD	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:				
C ty:				
Postcode (optional): $L/8$ $9UZ$				
6. Pre-application Advice	7. Trees and Hedges			
Has assistance or prior advice been sought from the local	Are there any trees or hedges on your own			
authority about this application?	property or on adjoining properties which are within falling distance of your proposed			
If Yes, please complete the following information about the advice	development?			
you were given. (This will help the authority to deal with this application more efficiently).	If Yes, please mark their position on a scaled			
Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:			
known, and then complete as much possible: Officer name:				
Oncer name:				
Reference:				
nocesite.	Will any trees or hedges need			
Date /DD 8464 20000	to be removed or pruned in order to carry out your proposal?			
Date (DD MM YYYY): (must be pre-application submission)	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 plan(s)/			
·	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			
existing car parking arrangements? If Yes, please describe:	(b) an elected member statements apply to you?			
	(c) related to a member of staff (d) related to an elected member (d) related to an elected member			
_	If Yes, please provide details of the name, relationship and role			
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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 2015 Certificate under Article 14 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.

application relates but the land is, or	s part of, an agricultural holding.	
* "owner" is a person with a freehold intere ** "agricultural holding" has the meaning	est or leasehold interest with at least 7 years left to run. 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):
I certify/ The applicant certifies that I ha 21 days before the date of this applicati application relates. * "owner" is a person with a freehold intere ** "agricultural tenant" has the meaning of	CERTIFICATE OF OWNERSHIP - CERTIFICATE B evelopment Management Procedure) (England) Order 2 eve/the applicant has given the requisite notice to everyon ion, was the owner* and/or agricultural tenant** of any parts or leasehold interest with at least 7 years left to run. everyon in section 65(8) of the Town and Country Planning Act 19	e else (as listed below) who, on the da art of the land or building to which thi
Name of Owner / Agricultural Tenant	Address	Date Notice Served
0		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

- 13 C				
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 -	I - Agent: Date (DD/MM/YYYY):			
	8-6-16 (date cannot be pre-application)			
14. Applicant Contact Details	15. Agent Contact Details			
Telephone numbers	Telephone numbers			
	ension mber: Extension number: Extension number:			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Email address (optional):	Email address (optional):			
16. Site Visit				
C()he site be seen from a public road, public footpath, bridl	dleway 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:				
Contact name:	Telephone number:			
Email address:				