ROCHDALE COUNCIL

FOR ASSISTANCE IN COMPLETING THIS FORM CONTACT

Planning and Regulation Service
PO Box 32, Telegraph House
Baillie Street
Rochdale, OL16 1JH

PHONE: 01706 924134 • **EMAIL:** development.control@rochdale.gov.uk • **WEB:** www.rochdale.gov.uk

26 MAR 2018

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

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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

Title:	MR
First name:	DALE
Last name:	ROGERS
Company (optional):	
Unit:	
House number:	12
House suffix:	
House name:	
Address 1:	BOTANY CLOSE,
Address 2:	HEYWOOD,
Address 3:	
Town:	ROCHDALE
County:	
Country:	
Postcode:	OL10 4QZ

2. Agent Name and Address

Title:	MR
First name:	NEIL
Last name:	BUTTERWORTH
Company (optional):	
Unit:	
House number:	89
House suffix:	
House name:	
Address 1:	HIGHER AINSWORTH RD,
Address 2:	RADCLIFFE,
Address 3:	
Town:	MANCHESTER
County:	
Country:	
Postcode:	M26 4JJ

3. Description of Proposed Works

Please describe the proposed works:

PROPOSED TWO STOREY SIDE EXTENSION, SINGLE STOREY REAR EXTENSION & EXTERNAL ALTERATIONS.

Has the work already started? ☐ Yes ☑ No

If Yes, please state when the work was started (DD/MM/YYYY): (date must be pre-application submissio

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: 12 House suffix:

House name:

Address 1: Bethany Close

Address 2: Heywood,

Address 3:

Town: Rochdale

County:

Postcode (optional):

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

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):

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 possible: ☐

Officer name:

Reference:

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

Details of the pre-application advice received:

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

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	RED FACING BRICKWORK + FEATURE WHITE RENDER BROWN TIMBER BOARDING AT HIGH LEVEL	RED FACINGS TO MATCH EXISTING + WHITE RENDER (NEW BOARDING) AT HIGH LEVEL, TO FRONT & REAR	☐	☐
Roof	BROWN ROOF TILES	BROWN TILES TO MATCH EXISTING	☐	☐
Windows	BROWN UPVC	BROWN UPVC	☐	☐
Doors	BROWN UPVC	BROWN UPVC	☐	☐
Boundary treatments (e.g. fences, walls)			☑	☐
Vehicle access and hard-standing			☑	☐
Lighting			☑	☐
Others (please specify)			☑	☐

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:

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.

** "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):
	S.L. Batt	20.3.19

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* and/or agricultural tenant** of any part of the land or building to which this application relates.

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

Name of Owner / Agricultural Tenant	Address	Date Notice Served

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional nformation. 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):
	N. Bateman	20.3.19 (date cannot be pre-application)

14. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:

Country code: Mobile number (optional): [redacted]

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): 07785 275483

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:

Contact name: [redacted] Telephone number:

Email address: