



## FOR ASSISTANCE IN COMPLETING THIS FORM CONTACT

Economy and Environment  
Planning Service  
Number One Riverside  
Smith St  
Rochdale  
OL16 1XU

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WEB : www.rochdale.gov.uk

# 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](http://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

|                     |                                                 |               |                                      |
|---------------------|-------------------------------------------------|---------------|--------------------------------------|
| Title:              | <input type="text" value="Miss"/>               | First name:   | <input type="text" value="Deborah"/> |
| Last name:          | <input type="text" value="Howarth"/>            |               |                                      |
| Company (optional): | <input type="text"/>                            |               |                                      |
| Unit:               | <input type="text"/>                            | House number: | <input type="text"/>                 |
|                     |                                                 | House suffix: | <input type="text"/>                 |
| House name:         | <input type="text" value="Fern Cottage"/>       |               |                                      |
| Address 1:          | <input type="text" value="Baytree lane"/>       |               |                                      |
| Address 2:          | <input type="text"/>                            |               |                                      |
| Address 3:          | <input type="text"/>                            |               |                                      |
| Town:               | <input type="text" value="Middleton"/>          |               |                                      |
| County:             | <input type="text" value="Greater Manchester"/> |               |                                      |
| Country:            | <input type="text"/>                            |               |                                      |
| Postcode:           | <input type="text" value="M24 2FH"/>            |               |                                      |

### 2. Agent Name and Address

|                     |                                                                 |               |                                    |
|---------------------|-----------------------------------------------------------------|---------------|------------------------------------|
| Title:              | <input type="text" value="Mr"/>                                 | First name:   | <input type="text" value="Garry"/> |
| Last name:          | <input type="text" value="Logan"/>                              |               |                                    |
| Company (optional): | <input type="text" value="LoganBuilding Architectural Design"/> |               |                                    |
| Unit:               | <input type="text"/>                                            | House number: | <input type="text" value="3"/>     |
|                     |                                                                 | House suffix: | <input type="text"/>               |
| House name:         | <input type="text"/>                                            |               |                                    |
| Address 1:          | <input type="text" value="River Street"/>                       |               |                                    |
| Address 2:          | <input type="text"/>                                            |               |                                    |
| Address 3:          | <input type="text"/>                                            |               |                                    |
| Town:               | <input type="text" value="Radcliffe"/>                          |               |                                    |
| County:             | <input type="text" value="Greater Manchester"/>                 |               |                                    |
| Country:            | <input type="text"/>                                            |               |                                    |
| Postcode:           | <input type="text" value="M26 1NZ"/>                            |               |                                    |

### 3. Description of Proposed Works

Please describe the proposed works:

Two Single Storey Extensions

### 3. Description of Proposed Works(continued)

Has the work already started? ☒ Yes ☐ No

If Yes, please state when the work was started (DD/MM/YYYY):

08/08/2022

(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:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

### 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):

### 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

## 10. Materials

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

|                                             | Existing<br>(where applicable)          | Proposed                                | Not<br>applicable                   | Don't<br>Know            |
|---------------------------------------------|-----------------------------------------|-----------------------------------------|-------------------------------------|--------------------------|
| Walls                                       | Rendered walls                          | Rendered walls                          | <input type="checkbox"/>            | <input type="checkbox"/> |
| Roof                                        | Slate Roof/Mineral Felt Flat Roof       | Tiled roof/ Rubberized Flat Roof        | <input type="checkbox"/>            | <input type="checkbox"/> |
| Windows                                     | uPVC Brown Frames                       | uPVC Brown Frames                       | <input type="checkbox"/>            | <input type="checkbox"/> |
| Doors                                       | uPVC Brown Frames                       | uPVC Brown Frames                       | <input type="checkbox"/>            | <input type="checkbox"/> |
| Boundary treatments<br>(e.g. fences, walls) | See plans- no changes to these proposed | See plans- no changes to these proposed | <input type="checkbox"/>            | <input type="checkbox"/> |
| Vehicle access and<br>hard-standing         | See plans- no changes to these proposed | See plans- no changes to these proposed | <input type="checkbox"/>            | <input type="checkbox"/> |
| Lighting                                    |                                         |                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Others<br>(please specify)                  |                                         |                                         | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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:

2223 plan numbers 01-06

## 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):

25/10/22

### CERTIFICATE OF OWNERSHIP - CERTIFICATE B

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

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):

## 11. Ownership Certificates and Agricultural Land Declaration (continued)

### CERTIFICATE OF OWNERSHIP - CERTIFICATE C

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

I certify/ The applicant certifies that:

- Neither Certificate A or B can be issued for this application
- All reasonable steps have been taken to find out the names and addresses of the other owners\* and/or agricultural tenants\*\* of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

\* "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

The steps taken were:

| Name of Owner / Agricultural Tenant | Address | Date Notice Served |
|-------------------------------------|---------|--------------------|
|                                     |         |                    |
|                                     |         |                    |
|                                     |         |                    |
|                                     |         |                    |
|                                     |         |                    |

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

### CERTIFICATE OF OWNERSHIP - CERTIFICATE D

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

I certify/ The applicant certifies that:

- Certificate A cannot be issued for this application
- All reasonable steps have been taken to find out the names and addresses of everyone else 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 to which this application relates, but I have/ the applicant has been unable to do so.

\* "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

The steps taken were:

|  |
|--|
|  |
|--|

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

## 12. Planning Application Requirements- Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

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 necessary to describe the subject of the application: ☒

The original and 3 copies of a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building: ☐

The correct fee: ☐

The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 12 Certificate (Agricultural Holdings): ☒

### 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):

25/10/22

(date cannot be pre-application)

### 14. Applicant Contact Details

Telephone numbers

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Country code:        | National number:     | Extension number:    |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

|                      |                           |
|----------------------|---------------------------|
| Country code:        | Mobile number (optional): |
| <input type="text"/> | <input type="text"/>      |

|                      |                        |
|----------------------|------------------------|
| Country code:        | Fax number (optional): |
| <input type="text"/> | <input type="text"/>   |

Email address (optional):

### 15. Agent Contact Details

Telephone numbers

|                      |                                           |                      |
|----------------------|-------------------------------------------|----------------------|
| Country code:        | National number:                          | Extension number:    |
| <input type="text"/> | <input type="text" value="07904 649901"/> | <input type="text"/> |

|                      |                                           |
|----------------------|-------------------------------------------|
| Country code:        | Mobile number (optional):                 |
| <input type="text"/> | <input type="text" value="07904 649901"/> |

|                      |                        |
|----------------------|------------------------|
| Country code:        | Fax number (optional): |
| <input type="text"/> | <input type="text"/>   |

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:

Telephone number:

|                      |                      |
|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> |
| <input type="text"/> | <input type="text"/> |