part one

STAFFORDSHIRE moorlands DISTRICT COUNCIL

ACHIEVING · EXCELLENCE

Staffordshire Moorlands District Council
Moorlands House, Stockwell Street, Leek
Staffordshire Moorlands, ST13 6HQ
Telephone: 0845 605 3013
www.staffsmoorlands.gov.uk

S.M.D.C. C.P.U.
13 AUG 2008
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# 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/MRS | First name: | A & S.M | | |
| Last name: | TILDESLEY | | | | |
| Company (optional): | | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | ASHLYN COURT | | | | |
| Address 1: | 159 | | | | |
| Address 2: | TEAN ROAD | | | | |
| Address 3: | | | | | |
| Town: | CHEADLE | | | | |
| County: | STAFFS | | | | |
| Country: | ENGLAND | | | | |
| Postcode: | ST10 1LS | | | | |

## 2. Agent Name and Address

| | | | | | |
|---|---|---|---|---|---|
| Title: | | First name: | | | |
| Last name: | | | | | |
| Company (optional): | | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | | | | | |
| Address 1: | | | | | |
| Address 2: | | | | | |
| Address 3: | | | | | |
| Town: | | | | | |
| County: | | | | | |
| Country: | | | | | |
| Postcode: | | | | | |

## 3. Description of Proposed Works

Please describe the proposed works:

PROPOSED ALTERATIONS AND EXTENSIONS TO FORM PART GARAGE TO DINING ROOM AND PART NEW ATTATCHED GARAGE

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## 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): _____ (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: | 159 | House suffix: | |
| House name: | ASHLYN COURT | | | | |
| Address 1: | 159 | | | | |
| Address 2: | TEAN ROAD | | | | |
| Address 3: | | | | | |
| Town: | CHEADLE | | | | |
| County: | STAFFS | | | | |
| Postcode (optional): | ST10 1LS | | | | |

## 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 boundary? ☑ Yes ☑ No

If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:

SEE MAIN PLAN

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.

SEE MAIN PLAN.

## 8. Parking

Will the proposed works affect existing car parking arrangements? ☐ Yes ☑ No

If Yes, please describe:

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## 9. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council? ☐ Yes ☑ No

If Yes, please provide details:

## 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 | Drawing references if applicable |
|---|---|---|---|---|---|
| Walls | CEMENT RENDER BRICK PROFILES | MINORIAL MIXTURE | ☐ | ☐ | |
| Roof | BLUE CONCRETE TILES | BLUE CONCRETE TILES | ☐ | ☐ | |
| Windows | UPVC | | ☐ | ☐ | |
| Doors | UPVC | 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:

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## 11. Certificates

**One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form**

**CERTIFICATE OF OWNERSHIP - CERTIFICATE A**

**Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of any part of the land or building to which the application relates.

| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |
|---|---|---|
| A Tildesley | | 12.08.08 |

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

**Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of any part of the land or building to which this application relates.

| Name of Owner | Address | Date Notice Served |
|---|---|---|
| | | |
| | | |
| | | |
| | | |
| | | |

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

**CERTIFICATE OF OWNERSHIP - CERTIFICATE C**

**Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of the land or building, or of a part of it , but I have/ the applicant has been unable to do so.

The steps taken were:

| Name of Owner | 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): |
|---|---|---|
| | | |

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## 14. Applicant Contact Details

Telephone numbers

| Country code: | National number: | Extension number: |
|---|---|---|
| | 01538 750341 | |

| Country code: | Mobile number (optional): |
|---|---|
| | |

| Country code: | Fax number (optional): |
|---|---|
| | |

Email address (optional):

albert.tildesley@btinternet.com

## 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:

Contact name:

Telephone number:

Email address:

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| Reference: | 08/01550/FUL<br>CHEADLE |
|---|---|




**Scale :** 1:1250

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| | |
|---|---|
| **Organisation** | SMDC |
| **Department** | Planning |
| **Description** | |