MANCHESTER CITY COUNCIL

PART 1 OF THE PLANNING application

08 7563

RECD 29 AUG 2008

	INIT	DATE REC'D
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Planning
PO Box 463, Town Hall Extension
Manchester M60 3NY
Tel: 0161 234 4516 Fax: 0161 234 4508
Email: planning@manchester.gov.uk

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:	G
Last name:	SHARPE
Company (optional):	
Unit:	
House number:	11
House suffix:	
House name:	
Address 1:	RIDGEWAY STREET
Address 2:	
Address 3:	
Town:	MILES PLATTING MANCHESTER
County:	LANCASHIRE
Country:	ENGLAND
Postcode:	M40 7EZ

2. Agent Name and Address

Title:	MR
First name:	STEPHEN
Last name:	HAGUE
Company (optional):	RIBA
Unit:	
House number:	3
House suffix:	
House name:	
Address 1:	HARROW AVENUE
Address 2:	
Address 3:	
Town:	ROCHDALE
County:	LANCASHIRE
Country:	ENGLAND
Postcode:	OL11 4DS

3. Description of Proposed Works

Please describe the proposed works:

SINGLE STOREY SIDE EXTENSION

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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: 11 House suffix:

House name:

Address 1: RIDGEWAY STREET

Address 2:

Address 3:

Town: MILES PLATTING MANCHESTER

County: LANCASHIRE

Postcode (optional): M40 7FZ

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:

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. 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	FACING BRICK	FACING BRICK	☐	☐	
Roof	CONCRETE TILES	CONCRETE TILES	☐	☐	
Windows	UPVC	UPVC	☐	☐	
Doors	UPVC	UPVC	☐	☐	
Boundary treatments (e.g. fences, walls)	FENCING	--	☐	☐	
Vehicle access and hard-standing	TWO CARS	--	☐	☐	
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

Date (DD/MM/YYYY): 28 AUGUST 2018

er Article 7

ed 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):

11. Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

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

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 *(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 to which this application relates, but I have/ the applicant has been unable to do so.

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):

AGRICULTURAL HOLDINGS CERTIFICATE

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

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of, an agricultural holding

Date (DD/MM/YYYY): 28 August 2008

te noti ho, on the day21 days before the date of this application, was a tenant of an ag is application relates, as listed below:

Name of Tenant	Address	Date Notice Served

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.

3 copies of a completed and dated application form: ☒

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: ☒

3 copies of other plans and drawings or information necessary to describe the subject of the application: ☒

3 copies of a design and access statement where proposed works fall within one of the following designated areas: ☒

- National Park
- Site of special scientific interest
- Conservation area
- Area of outstanding natural beauty
- World Heritage Site
- The Broads

The correct fee: ☒

3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): ☒

3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable): ☒

13. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information

Date (DD/MM/YYYY): 28 August 2008 (date cannot be pre-application)

14. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:

Email address (optional):

15. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01706	523206	

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: MR SHARPLES

Telephone number:

Email address: