

12 2 OCT 2025

Application for listed building consent for alterations, extension or demolition of a listed building.
Planning (Listed Buildings and Conservation Areas) Act 1990

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Arun District Council
Maltravers Road
Littlehampton
West Sussex BN17 5LF
Tel: 01903 737756
www.arun.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	MR	First name:	GABRIEL
Last name:	KARROUZE		
Company (optional):			
Unit:		House number:	11
		House suffix:	
House name:	YEW TREE COTTAGE		
Address 1:	FERRING STREET		
Address 2:			
Address 3:			
Town:	FERRING		
County:	WEST SUSSEX		
Country:	U.K.		
Postcode:	BN12 5HL		

2. Agent Name and Address

Title:	MR	First name:	GARETH
Last name:	HOWELL		
Company (optional):	—		
Unit:		House number:	
		House suffix:	
House name:	ALBURY PEACE		
Address 1:	THE STREET		
Address 2:			
Address 3:			
Town:	ALBURY		
County:	SURREY		
Country:	UK		
Postcode:	GU5 9AE		

3. Description of Proposed Work

Please describe the proposals to alter, extend or demolish the listed building(s):

TO FORM A VEHICLE ACCESS TO THE ABOVE
PROPERTY AT 11, FERRING STREET, FERRING.
REMOVE EXISTING 900MM WIDE GATE AND
WIDEN ENTRANCE TO 2.3 M. DEMOLISH 1.4 M
OF FLINT WALL AND MAKE GOOD WITH ROUNDED
OFF ENDS.

Has the work already started without consent? ☐ Yes ☒ No

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

—

(date must be pre-application submission)

Has the work been completed without consent? ☐ Yes ☒ No

If Yes, please state the date 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: YEW TREE COTTAGE

Address 1: FERRING STREET

Address 2:

Address 3:

Town: FERRING (WORTHING)

County: WEST SUSSEX

Postcode (optional): BN12 5HL

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: Northing:

Description:

DETACHED COTTAGE.

5. Related Proposals

Are there any current applications, previous proposals or demolitions for the site? ☒ Yes ☐ No

If Yes please describe and include the planning application reference number(s), if known:

Description	Reference number
DEMOLITION OF FLINT BOUNDARY WALL AND WIDEN TO PROVIDE AVEHICLE ACCESS	FG/39/14L

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 as possible: ☐

Officer name:

MARTYN WHITE

Reference:

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

Details of pre-application advice received?

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☒ No

If Yes, please provide details:

8. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent? ☐ Yes ☒ No 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

If Yes, please provide details of their name, role and how you are related to them.

9. Materials

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls			☒	☐
Roof covering			☒	☐
Chimney			☒	☐
Windows			☒	☐
External doors			☒	☐
Ceilings			☒	☐
Internal walls			☒	☐
Floors			☒	☐
Internal doors			☒	☐
Rainwater goods			☒	☐
Boundary treatments (e.g. fences, walls)		FLINT WALL TO HAVE ROUNDED ENDS.	☐	☐
Vehicle access and hard standing		SHINGLE	☐	☐
Lighting			☒	☐
Others (add description)			☒	☐

Are you supplying additional information on submitted drawings or plans?

☒ Yes

☐ No

If Yes, please state plan(s)/drawing(s) references:

PHOTOGRAPH OF EXISTING BOUNDARY FLINT WALL.
DRAWING BLOCK PLAN 11/01.

14. Ownership Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

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* 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.

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:

15. 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 (LPA) has been submitted.

The original and 3 copies* of a completed and dated application form:

☒

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 plan which identifies the land to which the application relates and drawn to an identified scale and showing the direction of North:

☒

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

☒

The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):

☒

*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.

16. 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):

20/10/25

(date cannot be pre-application)

17. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

18. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

19. 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:

GABRIEL KAROUZE

Telephone number:

Email address: