



Planning Services
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**HOUSEHOLD APPLICATION
FOR FULL PLANNING PERMISSION**

For Official use only

App No: FG/157/06

Date: 14/12/06

1. APPLICANT DETAILS

Full Name:

Brian Thomas Sutton

Address:

MALLARDS

61, LITTLE PADDOCKS

FERRING

WEST SUSSEX

Post Code: BN12 5NH

Telephone No:

01903504970

2. AGENT DETAILS

Full Name:

Address:

Post Code:

Telephone No:

3. Address of property to be altered or extended.

Address/Location:

MALLARDS

61 LITTLE PADDOCKS

FERRING

WEST SUSSEX

Post Code: BN12 5NH

4. Description of proposed works or use i.e. extensions, granny annexe, etc.

REAR DORMER (SOUTH EAST FACING) OVER STUDY, STAIRWELL AND SECOND BEDROOM. THIS WILL REPLACE THE EXISTING DORMER OVER STAIRWELL (WHICH IS IN NEED OF REPAIR). THIS PART OF THE PROPERTY IS ALSO IN NEED OF RE-TILING WHICH WILL BE DONE AT THE SAME TIME.

FG/157/06/

Rear dormer (south east facing) over study, stairwell and second bedroom to replace existing dormer in need of repair

5. Access to roads

Does your development involve:

(a) A new access to a road

☐ Yes ☒ No

(b) Alteration to an existing access

☐ Yes ☒ No

If Yes, please show details on your plans.

6. Public Right of Way

Will the development (including any new or altered access) affect a public footpath or other public right of way?

☐ Yes ☒ No

7. Particulars of Site

Does the development involve the removal or lopping of any trees, shrubs or hedges?

☐ Yes ☒ No

If Yes, show their position and spread on the plans indicating any to be removed or cut back.

8. Drainage

How do you propose to deal with foul / surface water drainage?

RAINWATER WILL BE ROUTED FROM THE FLAT ROOF OF THE DORMER DOWN TO THE EXISTING GUTTERING AND THEN TO EXISTING SOAKAWAY. NO ADDITIONAL SURFACE WATER NEEDS TO BE DEALT WITH AS THE AREA OF CATCHMENT REMAINS THE SAME.

I / We hereby apply for full planning permission

Signed:



Date:

13/11/21/2006

PLEASE READ THE NOTES CAREFULLY BEFORE DECIDING WHICH CERTIFICATE TO COMPLETE

CERTIFICATE OF OWNERSHIP (A)
UNDER SECTION 66 OF TOWN AND COUNTRY PLANNING ACT

I certify that

- 21 days before the date of the accompanying application nobody, except the applicant, was the owner of any part of the land to which the application relates
- None of the land to which the application relates is, or is part of, an agricultural holding.

Signed:



Date:

13/12/2006

*On behalf of

IF YOU FILL IN CERTIFICATE B BELOW, YOU MUST ALSO SERVE NOTICE No.1 ON THE OWNER(S)

CERTIFICATE OF OWNERSHIP (B)
UNDER SECTION 66 OF TOWN AND COUNTRY PLANNING ACT

I certify that

- The required Notice No. 1 has been given to everyone else who 21 days before the date of the accompanying application was the owner of any part of the land to which the application relates.

Name of owner:

Address at which
notice was served:

Date on which Notice No.1 was served:

 / /

- None of the land to which the application relates is, or is part of, an agricultural holding.

Signed:

Date:

 / /

*On behalf of

NOTE: 'Owner' means having a freehold, or leasehold interest with an unexpired term of not less than 7 years.**BEFORE SUBMITTING YOUR APPLICATION PLEASE CHECK THAT YOU HAVE INCLUDED THE FOLLOWING:**

- A. 6 copies of this form, signed and dated
- B. The correct Certificate of Ownership, signed and dated
- C. The correct Fee (if no fee is enclosed, please give reason below)

Please Confirm☐ Included☐ Included

- D. 6 copies of scaled plans
- (i) The location plan with application site outlined in red
- (ii) The site layout plan showing the position of adjoining dwellings
- (iii) Floor plans and elevations

☐ Included☐ Included☐ Included☐ Included**DATA PROTECTION**

The information contained in this form will be used by Arun District Council for the purposes indicated and will be further used or transferred to other organisations or individuals, only as the law permits.