



Planning Services
Strategy department
Arun District Council
Arun Civic Centre
Maltravers Road
Littlehampton
West Sussex BN17 5LF

Tel: (01903) 737500
Fax: (01903) 716019
Dx: 57406 Littlehampton
Minicom: (01903) 732765
e-mail: planning@arun.gov.uk

**HOUSEHOLD APPLICATION
FOR FULL PLANNING PERMISSION**

For Official use only

App No:

FP181107

Date:

27/3/07

1. APPLICANT DETAILS

Full Name:

SIMON PERRY

Address:

36 CROSSBUSH ROAD

FELPHAM WEST SUSSEX

Post Code:

PO22 7LT

Telephone No:

01243 584954

2. AGENT DETAILS

Full Name:

T. MURRAY

Address:

8 SHAW CLOSE MIDDLETON ON
SEA WEST SUSSEX

Post Code:

PO22 7TQ

Telephone No:

01243 586278

3. Address of property to be altered or extended.

Address/Location:

AS APPLICANT

Post Code:

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

REAR EXTENSION AND ALTERATIONS

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?

PUBLIC SEWER / SOAKAWAY

I / We hereby apply for full planning permission

Signed:

H. Heeney

Date:

26/03/2007

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:

H. Mearns

Date:

26/03/2007

*On behalf of

SIMON PERRY

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:

Please Confirm

A. 6 copies of this form, signed and dated

☒ Included

B. The correct Certificate of Ownership, signed and dated

☒ Included

C. The correct Fee (if no fee is enclosed, please give reason below)

D. 6 copies of scaled plans

☒ Included

(i) The location plan with application site outlined in red

☒ Included

(ii) The site layout plan showing the position of adjoining dwellings

☒ Included

(iii) Floor plans and elevations

☒ 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.

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