

Application for a Lawful Development Certificate for a Proposed use or development.
Town and Country Planning Act 1990: Section 192, as amended by section 10 of
the Planning and Compensation act 1991.
Town and Country Planning (Development Management Procedure) (England) Order
2015

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 and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

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:



LU/ 99/19/CLP

Arun Civic Centre
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:		First name:	SALLY		
Last name:	WALKER				
Company (optional):	THE PARK SURGERY				
Unit:		House number:		House suffix:	
House name:	THE PARK SURGERY				
Address 1:	ST FLORAS ROAD				
Address 2:					
Address 3:					
Town:	LITTLEHAMPTON				
County:	WEST SUSSEX				
Country:	ENGLAND				
Postcode:	BN17 6BF				

2. Agent Name and Address

Title:	MR	First name:	PAUL		
Last name:	VEYSEN				
Company (optional):	STUDIO FOUR ARCHITECTS				
Unit:	4	House number:		House suffix:	
House name:					
Address 1:	TOLLGATE ESTATES				
Address 2:					
Address 3:					
Town:	ROMSEY				
County:	HAMPSHIRE				
Country:	ENGLAND				
Postcode:	SO51 0HE				

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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

Easting: Northing:

Description:

4. 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:

Reference:

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

Details of pre-application advice received?

No official advice was sought other than being told on the telephone that this was the relevant application for the works proposed at The Park Surgery.

5. Lawful Development Certificate - Interest In Land

Please state the applicant's interest in the land?

Owner: ☒ Yes ☐ No Lessee: ☐ Yes ☐ No Occupier: ☐ Yes ☐ No

If Yes to Lessee or Occupier please give details of the owner and state whether they have been informed in writing of this application:

Name	Address	Have they been informed in writing of the application	
		Yes	No
		☐	☐

If No to all the above, please give name and addresses of anyone you know who has an interest in the land:

Name	Address	Nature of interest in the land	Have they been informed of the application?		If they have not been informed of the application please explain why not
			Yes	No	
			☐	☐	
			☐	☐	
			☐	☐	
			☐	☐	

6. 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.

7. Grounds For Application

Information About The Existing Use(s)

Please explain why you consider the existing or last use of the land is lawful, or why you consider that any existing buildings, which it is proposed to alter, or extend are lawful

THE EXISTING USE IS AS A G.P. SURGERY. THE BUILDING WORKS PROPOSED ARE FOR A COURTYARD INFILL WITH INSULATED ROOF TO CREATE A NEW WAITING ROOM. THESE WORKS DO NOT ALTER EXISTING EXTERNAL ELEVATIONS THEREFORE WE BELIEVE A FULL PLANNING APPLICATION IS NOT REQUIRED.

Please list the supporting documentary evidence (such as a planning permission) which accompanies this application:

- | | |
|----|--|
| 1. | DWG 39020 - 99 - C1
SITE LOCATION PLAN |
| 2. | DWG 39020 - 100 - C1
EXISTING GROUND FLOOR PLAN |
| 3. | DWG 39020 - 200 - C1
PROPOSED GROUND FLOOR PLAN |
| 4. | DWG 39020 - 250 - C1
DEMOLITIONS PLAN. |
| 5. | DWG 39020 - 260 - C1
TYPICAL SECTION A-A + B-B |

If you consider the existing, or last use is within a 'Use Class' in the Town and Country Planning (Use Classes) Order 1987 (as amended), state which one:

G.P. SURGERY.

Information About The Proposed Use(s)

If you consider the proposed use is within a 'Use Class' in the Town and Country Planning (Use Classes) Order 1987 (as amended), state which one:

G.P. SURGERY.

Is the proposed operation or use:

☐ Temporary ☒ Permanent

If temporary please give details:

Please state why you consider that a Lawful Development Certificate should be granted for this proposal:

BUILDING WORKS DO NOT ALTER EXISTING EXTERNAL ELEVATIONS THEREFORE WE BELIEVE A FULL PLANNING APPLICATION IS NOT REQUIRED BUT THAT A LAWFUL DEVELOPMENT CERTIFICATE IS.

8. Description Of Proposal

Does the proposal consist of, or include:

a) The carrying out of building or other operations?

☒ Yes

☐ No

If Yes to a, please give detailed description of all such operations (includes the need to describe any proposal to alter or create a new access, layout any new street, construct any associated hard-standings, means of enclosure or means of draining the land/buildings) and indicate on your plans (in the case of a proposed building the plan should indicate the precise siting and exact dimensions):

THE INTERNAL COURTYARD IS BEING INFILLED WITH INSULATED ROOF TO CREATE NEW WAITING AREA AS PER SUPPLIED PLANS. WORKS DO NOT AFFECT EXISTING EXTERNAL ELEVATIONS, THE SITE SURROUNDS OR CAR PARKING.

b) Change of use of the land or building(s)?

☐ Yes

☒ No

If Yes to b, please give a full description of the scale and nature of the proposed use, including the processes to be carried out, any machinery to be installed and the hours the proposed use will be carried out:

If Yes to b, please describe fully the existing or the last known use, with the date this use ceased:

Has the proposal been started?

☒ Yes

☐ No

9. 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 burden of proof in a Lawful Development Certificate is firmly with the applicant and therefore sufficient and precise information should be provided.

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



The original and 3 copies* of such evidence verifying the information included in the application as you can provide:



The original and 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:



The correct fee:



*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.

10. Declaration

I/we hereby apply for a Lawful Development Certificate 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):

26/03/2019. (date cannot be pre-application submission)

WARNING:

The amended section 194 of the 1990 Act provides that it is an offence to furnish false or misleading information or to withhold material information with intent to deceive. Section 193(7) enables the authority to revoke, at any time, a certificate they may have been issued as a result of such false or misleading information.

11. Applicant Contact Details

Telephone numbers

Country code: National number:

Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

12. Agent Contact Details

Telephone numbers

Country code: National number:

Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

13. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

☒ Yes☐ No

SITE - YES
AREA OF WORKS -
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: