

HOUSEHOLDER PLANNING APPLICATION

OFFICE USE ONLY
APPLICATION NUMBER

03/0982

DATE RECEIVED

18/8/03

DATE VALID

19/8/03

Use this form to apply for Planning Permission for:-

- an Extension
- a Loft Conversion
- a New or Altered Access
- a High Wall or Fence
- a Garage or Outbuilding
- a Satellite Dish

Please return:-

- 5 copies of the Form
- 5 copies of the Plans
- Ownership Certificate
- the correct fee

1. NAME AND ADDRESS OF APPLICANT

MR & MRS AYRES
4B SIMPLEMARSU ROAD
ADDLESTONE
Post Code KT15 1QJ
Day Tel No. 887018

2. NAME AND ADDRESS OF AGENT (If Used)

A. PLACIUS
50 COPPERFIELD ROSE
ADDLESTONE
Post Code KT15 1AN
Tel No. 07775 761238

3. ADDRESS OF PROPERTY TO BE ALTERED OR EXTENDED

4B SIMPLEMARSU ROAD

4. OWNERSHIP

Please indicate applicants interest in the property and complete the appropriate Ownership Certificate

Freeholder Other
Leaseholder
Purchaser

5. BRIEF DESCRIPTION OF WORKS

eg erection of two storey rear extension

SINGLE STOREY SIDE
EXTENSION

6. DESCRIPTION OF MATERIALS

NEW BRICK, ROOF TILES,
WINDOWS, etc TO MATCH
EXTN

7. AREA OF LAND

362m²

Hectares
 Acres

8. ACCESS AND PARKING

Will your proposal affect? Please tick appropriate boxes

Vehicular Access Yes No

A Public Right of Way Yes No

Existing Parking Yes No

If yes, please show details on plans

10. TREES

Does the proposal involve the felling of any trees?

Please tick one box Yes No

If yes, please show details on plans

9. DRAINAGE

a. Please indicate method of Surface Water Disposal

INTO NEW SOAKAWAY

b. Please indicate method of Foul Water Disposal

Please tick one box

Mains Sewer Septic Tank

Cesspit Other

11. PLEASE SIGN AND DATE THIS FORM BEFORE SUBMITTING

I/We hereby apply for Full Planning Permission for the development described above and shown on the accompanying plans.

Signed [Signature]

Date: 13/8/02

On behalf of (if agent) MR & MRS AYRES