

Planning Department  
16, Lord Street,  
Wrexham  
LL11 1LG  
Helpline: 01978 298994



COUNTY BOROUGH COUNCIL

Adran Cynllunio  
16, Stryt Yr Arglwydd  
Wrecsam  
LL11 1LG  
Llinell Gymorth: 01978 298994

## Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990

### Publication of applications on planning authority websites.

Please note that the information provided on this application form and supporting documents may be published on the Authority's website. If you require any further clarification please contact the Authority's planning department.

Please complete using block capitals and black ink.

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

P2024/0173

### 1. Applicant name and address

Title:		First name:	
Last Name			
Company:			
Unit:	House number	House suffix	
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Post Code:			

### 2. Agent name and address

Title:		First name:	
Last Name			
Company:			
Unit:	House name	House suffix	
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:	21 FEB 2024		
County:			
Country:			
Post Code:			

NOT APPLICABLE

### 3. Description of proposed works

Please describe the proposed works

PROPOSED SINGLE STOREY REAR EXTENSION



### 3. Description of Proposed Works (continued)

Has the work already started? ☐ Yes ☒ No

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

Has the work been completed? ☐ Yes ☒ No

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

### 4. Site address details

Unit:  House number  House suffix

House name:

Address 1:  NEW ROAD

Address 2:  COEDPOETH

Address 3:

Town:  WREXHAM

County:  WREXHAM

Country:

Post Code:  LL11 3EG

### 5. Pedestrian and Vehicle Access, Roads and Rights of way

Is a new or altered vehicle access proposed to or from the public highway ☒ Yes ☒ No

Is a new or altered pedestrian access proposed to or from the public highway ☒ Yes ☒ No

Do the proposals require any diversions, extinguishments and/or creation of public rights of way? ☒ Yes ☒ No

If Yes to any questions, please show details on your plans or drawings and state the reference number of the plans/drawings

### 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:

Reference:

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

Details of the pre-application advice received:

### 7. Biodiversity and Geological Conservation

Does your proposal involve:

(i) Demolition of a building? ☐ Yes ☒ No

(ii) alterations or enlargement to your roof? ☐ Yes ☒ No

(iii) the loss of any trees or hedges? ☐ Yes ☒ No

If you have answered yes to any of the above questions, you may be required to submit a biodiversity survey to your Local Planning Authority with your application form. Your Local Authority will be able to advise you further, guidance is also available from the planning portal.

### 8. Parking

Will the proposal effect existing car parking arrangements? ☐ Yes ☒ No

If Yes, please describe:

### 9. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the Council? ☐ Yes ☒ No

If Yes, please provide details:



## 10. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material

	Existing (where applicable)	Proposed	Not applicable	Don't know	Drawing references if applicable
Walls	STONework CLADDING	K REND	<input type="checkbox"/>	<input type="checkbox"/>	
Roof	SLATED PITCHED ROOF	SLATED PITCHED ROOF TO MATCH THE EXISTING	<input type="checkbox"/>	<input type="checkbox"/>	
Windows	P.V.C.	DOUBLE GLAZED WINDOWS WITH P.V.C. FRAMES	<input type="checkbox"/>	<input type="checkbox"/>	
Doors	PVC	P.V.C. TO MATCH EXISTING	<input type="checkbox"/>	<input type="checkbox"/>	
Boundary treatments (e.g. fences, walls)	N/A	AS EXISTING	<input type="checkbox"/>	<input type="checkbox"/>	
Vehicle access and hard-standing	N/A	AS EXISTING	<input type="checkbox"/>	<input type="checkbox"/>	
Lighting	N/A	AS EXISTING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)	N/A	AS EXISTING	<input checked="" type="checkbox"/>	<input type="checkbox"/>	

Are you supplying additional information on submitted plan(s)/drawing(s)/ design and access statements?  
If Yes Please state references for the plan(s)/drawing(s)/ design and access statements.

☐ Yes ☒ No



### 11. Certificates

One certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form.

#### CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (General development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that on the day 21 days before the date of this application nobody except myself/the applicant was the owner( owner is the person with a freehold interest with at least 7years left to run) of any part of the land or building to which the application relates.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

20/2/24

#### AGRICULTURAL HOLDINGS CERTIFICATE

Town and Country Planning (General development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You must complete either A or B

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

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

20/2/24

### 12. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have 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 has been submitted.

The original and three copies of a completed and dated application form

☐

The original and three copies of a design and access statement where proposed works fall within one of the following designated areas:

- National Park
- Site of specific scientific interest
- Conservation area
- Area of outstanding natural beauty
- World heritage site

☐

The correct fee.

☐

The original and three copies of a plan which identifies the land to which the application relates, drawn to an identified scale and showing the direction North

☐

The original and three copies of the completed, dated Article 7 Certificate (Agricultural Holdings):

☐

The original and three copies of other plans and drawings or information necessary to describe the subject of the application.

☐

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

☐

### 13. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

20/2/24

(date cannot be pre-application)

### 14. Applicant contact details

Telephone numbers

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

### 15. Agent contact details

Telephone numbers

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):



#### 16. 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:

Fax number (optional):

Email address (optional):