HILLINGDON
LONDON

London Borough of Hillingdon, Planning & Community Services, 3N Civic Centre, High Street, Uxbridge, Middlesex UB8 1UW
Tel: 01895 250230 Web: www.hillingdon.gov.uk

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

LONDON BORO OF HILLINGDON
RECEIVED
24 MAY 2011
PLANNING & TRANSPORTATION
GROUP

Publication of applications on planning authority websites

Please note that the information provided on this application form and in 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.

1. Applicant Name and Address

Title:	MR
First name:	RICHARD
Last name:	ABBOTT
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	MARACHELLE
Address 1:	CUCKOO HILL
Address 2:	
Address 3:	
Town:	PINNER
County:	MIDDLESEX
Country:	ENGLAND
Postcode:	HA5 2BB

2. Agent Name and Address

Title:	MR
First name:	JOHN
Last name:	ORCHARD
Company (optional):	ORCHARD ASSOCIATES
Unit:	
House number:	29
House suffix:	
House name:	
Address 1:	WEST STREET
Address 2:	
Address 3:	
Town:	HARROW ON THE HILL
County:	MIDDLESEX
Country:	ENGLAND
Postcode:	HA1 3ED

3. Description of Proposed Works

Please describe the proposed works:

GROUND FLOOR SIDE EXTENSION AND NEW ENTRANCE PORCH.
FIRST FLOOR SIDE EXTENSION.
REMOVAL OF UNSIGHTLY FRONT EXTENSION.
LOFT CONVERSION WITH DORMERS AND NEW ROOF.

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): (date must be pre-application submission)

Has the work already been completed? ☐ Yes ☑ No

If Yes, please state when the work was completed (DD/MM/YYYY): (date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name: MARACHELLE

Address 1: CUCKOO HILL

Address 2:

Address 3:

Town: PINNER

County: MIDDLESEX

Postcode (optional): HA5 2BB

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(s) of the plan(s)/ drawing(s):

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 possible: ☐

Officer name: GARETH GWYNNE MEETING

Reference: 15883/APP/2010/2877

Date (DD MM YYYY): (must be pre-application submission) 12/04/2011

Details of the pre-application advice received:

FOLLOWING REFUSAL REVISED DESIGN SCHEME DISCUSSED AT CIVIC CENTRE WITH GARETH AND MEG HIRANI AND AGREED SUBMISSION OF NEW APPLICATION FOR POSITIVE CONSIDERATION

7. Trees and Hedges

Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your boundary? ☑ Yes ☐ No

If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:

478/1 AND 4-B

Will any trees or hedges need to be removed or pruned in order to carry out your proposal? ☐ Yes ☑ No

If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.

8. Parking

Will the proposed works affect existing car parking arrangements? ☐ Yes ☑ No

If Yes, please describe:

9. Authority Employee / Member

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

Do any of these statements apply to you? ☐ Yes ☑ No

If yes please provide details of the name, relationship and role

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
Walls	BRICKWORK OF VARYING COLOUR	PAINTED RENDER	☐	☐
Roof	TILING, FELTED FLAT ROOFS	TILING, CONCEALED FLAT ROOF AND LEADWORK TO DORMER ROOFS	☐	☐
Windows	DOUBLE-GLAZED ALUMINIUM (WHITE PPC)	DOUBLE-GLAZED ALUMINIUM (WHITE PPC)	☐	☐
Doors	DOUBLE-GLAZED ALUMINIUM (WHITE PPC)	DOUBLE-GLAZED ALUMINIUM (WHITE PPC)	☐	☐
Boundary treatments (e.g. fences, walls)	TIMBER FENCING	EXISTING FENCING	☐	☐
Vehicle access and hard-standing	TARMACADAM	EXISTING TARMACADAM	☐	☐
Lighting			☑	☐
Others (please specify)			☑	☐

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? ☑ Yes ☐ No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

PHOTOGRAPHS

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