HILLINGDON
LONDON

London Borough of Hillingdon, Residents 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 dwellin
Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

ublication of applications on planning authority websites

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

ease complete using block capitals and black ink.
is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

. Applicant Name and Address

itle:	MR
First name:	HUSSEIN
ast name:	BHIRWANI
ompany ptional):	
nit:	
House number:	1
House suffix:	
ouse ame:	—
ddress 1:	MINERVA DRIVE
ddress 2:	—
ddress 3:	—
own:	WATFORD
ounty:	HERTS.
ountry:	
ostcode:	WD24 5LD

2. Agent Name and Address

Title:	MR
First name:	DAVID
Last name:	PARKES
Company (optional):	—
Unit:	
House number:	53
House suffix:	
House name:	—
Address 1:	DELMAR AVENUE
Address 2:	
Address 3:	
Town:	HEMEL HEMPSTEAD
County:	HERTS
Country:	
Postcode:	HP2 4LZ

. Description of Proposed Works

lease describe the proposed works:

PROPOSED LONG EXTENSION 6 METRES, 3M LONGER THAN CURRENT, Nº 84, ALREADY EXTENDED TO 6M.

. Description of Proposed Works (continued)

as the work already started? ☐ Yes ☑ No

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

as the work already been completed? ☐ Yes ☑ No

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

. Site Address Details

ease provide the full postal address of the application site.

nit: House number: 92 House suffix:

ouse ame: —

ddress 1: CLAYTON ROAD

ddress 2:

ddress 3:

own: HAYES

ounty: MIDDX.

ostcode ptional): UB3 1BA.

5. Pedestrian and Vehicle Access, Roads and Rights of W

Is a new or altered vehicle access proposed to or from the public highway? ☐ Yes ☑ N

Is a new or altered pedestrian access proposed to or from the public highway? ☐ Yes ☑ N

Do the proposals require any diversions, extinguishments and/or creation of public rights of way? ☐ Yes ☑ N

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):

. Pre-application Advice

as assistance or prior advice been sought from the local uthority about this application? ☑ Yes ☐ No

Yes, please complete the following information about the advice ou were given. (This will help the authority to deal with this pplication more efficiently).

ease tick if the full contact details are not nown, and then complete as much possible: ☑

fficer name:

eference: DUTY PLANNING OFFICER.

Date (DD MM YYYY): 23/11/2015
ust be pre-application submission)

etails of the pre-application advice received:

PERMITED DEVELOPMENT RIGHTS REMOVED, WILL BE TAKEN ON IT'S MERITS.

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 proposed development? ☐ Yes ☑ Nc

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

Will any trees or hedges need to be removed or pruned in order to carry out your proposal? ☐ Yes ☑ N

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.

. Parking

ill the proposed works affect isting car parking arrangements? ☐ Yes ☑ No

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

0. Materials

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

	Existing (where applicable)	Proposed	Not applicable	Dor Knc
Walls		MATCHING FACE BRICK AND RENDER	☐	☐
Roof		FELT OR G.R.P.	☐	☐
Windows		WHITE P.V.C'U'	☐	☐
Doors		WHITE PVC'U'	☐	☐
Boundary treatments (e.g. fences, walls)			☑	☐
Vehicle access and hard-standing			☑	☐
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: