



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

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:	MANGI
Last name:	BRAR		
Company (optional):			
Unit:	House number:	72	House suffix:
House name:			
Address 1:	WINDSOR AVENUE		
Address 2:			
Address 3:			
Town:	HILLINGDON		
County:	MIDDLESEX		
Country:	UK		
Postcode:	UB10 9AT		

2. Agent Name and Address

Title:	MR.	First name:	RAMESH
Last name:	PANKHAYIA		
Company (optional):	R. P. ARCH. SERVICES		
Unit:	House number:	39A	House suffix:
House name:			
Address 1:	NORTHWOOD ROAD		
Address 2:			
Address 3:			
Town:	NORTHWOOD		
County:	MIDDLESEX		
Country:	UK		
Postcode:	HA6 1ND		

3. Description of Proposed Works

Please describe the proposed works:

DEMOLITION OF EXISTING STORE AND ADDITION OF A SINGLE STOREY SIDE EXTENSION.

3. Description of Proposed Works (continued)

Has the work already been started without planning permission?

☐ Yes

☒ No

If Yes, please state when the works were started (DD/MM/YYYY):

(date must be pre-application submission)

Has the work already been completed without planning permission?

☐ Yes

☒ No

If Yes, please state when the works were 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:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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:

Reference:

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

Advice given:

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:

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, indicating the scale, which trees by giving them numbers e.g. T1, T2 etc. and state the reference number of any plans or drawings:

8. Parking

Will the proposed works affect 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	FACING BRICKS	TO MATCH OR SIMILAR	☐	☐	
Roof	PITCHED TILED	PITCHED TILED	☐	☐	
Windows	DOUBLE GLAZED	DOUBLE GLAZED	☐	☐	
Doors	— 11 —	— 11 —	☐	☐	
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: