



## 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:	GARY
Last name:	BALL		
Company (optional):			
Unit:		House number:	5
House name:			
Address 1:	HARLINGTON CLOSE		
Address 2:			
Address 3:			
Town:	HARLINGTON		
County:	MIDDLESEX		
Country:	UK		
Postcode:	UB3 5BW		

#### 2. Agent Name and Address

Title:	MR	First name:	DONALD
Last name:	BUSK		
Company (optional):	AVIATION & STRUCTURAL DESIGN		
Unit:		House number:	273
House name:			
Address 1:	FELTHAM HILL ROAD		
Address 2:			
Address 3:			
Town:	ASHFORD		
County:	MIDDLESEX		
Country:	UK		
Postcode:	TW15 1LT		

#### 3. Description of Proposed Works

Please describe the proposed works:

ERETION OF PART SINGLE-STOREY, PART TWO-STOREY FLANK AND REAR EXTENSION TO SEMI-DETACHED DWELLING.

### 3. 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 submission)

as the work already been completed?  Yes  No

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: 5 House suffix:

Postcode:

Address 1: HARLINGTON CLOSE

Address 2:

Address 3:

Town: HARLINGTON

County: MIDDLESEX

Postcode (optional): UB3 5BW

### 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

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:

MR. NAIM POPTANI

Reference:

Date (DD MM YYYY):  05/03/2018  
must be pre-application submission

Details of the pre-application advice received:

MR POPTANI MADE RECOMMENDATIONS REGARDING CHANGES TO THE PREVIOUS APPLICATION, WHICH HAVE BEEN IMPLEMENTED, AND IT IS ANTICIPATED THAT PLANNING APPROVAL WILL BE GRANTED.

### 8. Parking

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

Yes, please describe:

### 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 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.

### 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

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	ROUGH-CAST RENDER: TO BE RE-RENDERED IN SMOOTH RENDER AND PAINTED OFF-WHITE	SMOOTH RENDER PAINTED OFF-WHITE	<input type="checkbox"/>	<input type="checkbox"/>
Roof	BROWN PLAIN TILES	TO MATCH EXISTING	<input type="checkbox"/>	<input type="checkbox"/>
Windows	WHITE PVCU FRAMES	TO MATCH EXISTING	<input type="checkbox"/>	<input type="checkbox"/>
Doors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Boundary treatments e.g. fences, walls)	FEATHER EDGE FENCING 1.8m HIGH	EXISTING RETAINED	<input type="checkbox"/>	<input type="checkbox"/>
/vehicle access and hard-standing			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others please specify)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

Yes

No

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

DRAWINGS DR 17/705/01 mod A, 02 mod A, 03 mod A and 04.  
SPECIFICATION & SCOPE OF WORKS SP 17/705 (REVISED)  
ORDNANCE SURVEY EXTRACT 1:1250 SCALE (SITE LOCATION PLAN)

