If you would rather make this application online, you can do so on our website:
https://www.planningportal.co.uk/apply

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

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)'.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

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

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applicant Name and Address

Title:	MR	First name:	SUKHVINDER			
Last name:	SOHAL					
Company (optional):	N/A					
Unit:	N/A	House number:	39	House suffix:	N/A	
House name:	N/A					
Address 1:	CHERRY ORCHARD					
Address 2:	N/A					
Address 3:	N/A					
Town:	WEST DRAYTON					
County:	MIDDX					
Country:	ENGLAND					
Postcode:	UB7 7JR					

2. Agent Name and Address

Title:		First name:				
Last name:						
Company (optional):	NETWORK PROPERTY DESIGN					
Unit:	18-20	House number:	N/A	House suffix:	N/A	
House name:	N/A					
Address 1:	PARK STREET					
Address 2:	N/A					
Address 3:	N/A					
Town:	SLOUGH					
County:	BERKSHIRE					
Country:	ENGLAND					
Postcode:	SL1 1PD					

3. Description of Proposed Works

Please describe the proposed works:

RETROSPECTIVE APPLICATION FOR SINGLE STOREY REAR WITH FLAT ROOF AND FRONT PORCH WITH PITCH ROOF
RE-SUBMISSION OF APP Nº REF:- 57390/APP/2021/35.

Has the work already started? ☑ Yes ☐ No

If Yes, please state when the work was started (DD/MM/YYYY): APRIL 2019 (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): SEP. 2019 (date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit:	N/A	House number:	39	House suffix:	N/A
House name:	N/A				
Address 1:	CHERRY ORCHARD				
Address 2:	N/A				
Address 3:	N/A				
Town:	WEST DRAYTON				
County:	MIDDX				
Postcode (optional):	UB7 7JR				

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):

N/A

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)

Details of the pre-application advice received:

EXTENSION WAS THOUGHT TO BE DONE UNDER PERMITTED DEVELOPMENT RIGHTS

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 ☑ No

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

N/A

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.

N/A

8. Parking

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

If Yes, please describe:

N/A

9. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent? ☐ Yes ☑ No

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

If Yes, please provide details of their name, role and how you are related to them.

N/A

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		PAINTED RENDER AND BRICKWORK	☐	☐
Roof		ROOF TILES COLOUR TO MATCH EXISTING FLAT ROOF	☐	☐
Windows		DOUBLE GLAZED	☐	☐
Doors		DOUBLE GLAZED	☐	☐
Boundary treatments (e.g. fences, walls)	TIMBER FENCING TO STAY		☐	☐

10. Materials

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

Vehicle access and hard-standing	EXISTING		☑	☐
Lighting		SECURITY LIGHTING TO CLIENTS SPEC.	☐	☐
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:

DRAWING NO'S ORC01 / 1^A AND 2^A
SITE PLAN AT SCALE OF 1:1250