Planning Services
Richmond Road
Worthing
Tel: 01903 239999
Website: www.worthing.gov.uk/planning

CAB

For office use only
App. No. WB/08/0504/Full
Date Rec. 13/5/08
Case Off.

Application for Planning Permission.
Town and Country Planning Act 1990

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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:	GREG
Last name:	DAVEY
Company (optional):	
Unit:	
House number:	4
House suffix:	
House name:	
Address 1:	WESTBROOKE
Address 2:	
Address 3:	
Town:	WORTHING
County:	WEST SUSSEX
Country:	
Postcode:	BN11 1RE

2. Agent Name and Address

Title:	MR
First name:	DAVID
Last name:	BENNETT B.Sc. Hons MRICS
Company (optional):	DJB LTD
Unit:	
House number:	48
House suffix:	
House name:	
Address 1:	REIGATE ROAD
Address 2:	
Address 3:	
Town:	WORTHING
County:	WEST SUSSEX
Country:	
Postcode:	BN11 5NE

3. Description of the Proposal

Please describe the proposed development, including any change of use:

DEMOLITION AND REPLACEMENT OF DWELLING

WITHDRAWN 19-6-08

Has the building, work or change of use already started? ☐ Yes ☑ No

If Yes, please state the date when building, work or use were started (DD/MM/YYYY): (date must be pre-application submission)

Has the building, work or change of use been completed? ☐ Yes ☑ No

If Yes, please state the date when the building, work or change of use 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: 6 | House suffix:

House name:

Address 1: QUEENS ROAD

Address 2:

Address 3:

Town: WORTHING

County: WEST SUSSEX

Postcode (optional): BN11 3LX

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: | Northing:

Description:

5. 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 as possible: ☐

Officer name: CHRIS WRIGHT

Reference:

Date (DD/MM/YYYY): APRIL '08
(must be pre-application submission)

Details of pre-application advice received?

POSITIVE VERBAL COMMENT

6. 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

Are there any new public roads to be provided within the site? ☐ Yes ☑ No

Are there any new public rights of way to be provided within or adjacent to the site? ☐ Yes ☑ No

Do the proposals require any diversions /extinguishments and/or creation of rights of way? ☐ Yes ☑ No

If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan (s)/drawings(s)

SEE COVERING LETTER

7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste? ☑ Yes ☐ No

If Yes, please provide details:

SEE DRAWINGS

Have arrangements been made for the separate storage and collection of recyclable waste? ☑ Yes ☐ No

If Yes, please provide details:

SEE DRAWINGS

8. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☑ No

If Yes, please provide details:

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: