CODE PLOTS,

COMHAIRLE CHONTAE LIATROMA **PLANNING SECTION** EITRIM COUNTY COUNCIL LEITRIM COUNTY COUNCIL



Declaration Regarding Development / Exempted Development (Section 5 of Planning & Development Acts 2000 As Amended)

APPLICATION FORM

Please note: A fee of €80.00 must accompany this form

- 1. Name of person seeking declaration [Applicant] Michael & Mary Hand
- 2. Postal Address of Property /Site or Building to which the declaration sought relates

12 The Waterfront, Dromod, Co Leitrim.

- Applicant's legal interest in the land or structure. [Give details] 3 Legal Owners
- State whether or not the applicant is the owner of the property in question [Yes] and if $\{N_0\}$ please provide the information under item 11 at the end of this form
- State if owner / occupiers are aware of the current application for Declaration under S 5 of the
- Type of declaration sought
 - a. That the proposal is or is not development within the Act [Yes] or [No] and if {yes}
 - b. That the development is or is not Exempt development [Yes]
- Provide full description of the question /matter / subject which arises wherein a declaration on

The proposal is to add new doors and a balcony to the front elevation of No 12, The Waterfront, Dromod Harbour, Co Leitrim. More specifically, this would involve:

- Breaking out a 2m wide x 2.2m high opening from the first-floor bedroom install French
- Removal of existing Velux rooflight and construction of a pitched roof extension using similar materials to the existing roof
- Erection of a 3m x 1m steel balcony, similar to and matching the existing balcony.

Signature:	Michael & Aland Date: 8/1/2025
the area, sh	icant is advised to set out the matter on which the declaration is sought, as comprehe and should use additional material / pages if necessary, to give as full account as poster. A site map to a scale of not less than 1;2500 based on the Ordnance Survey map hall be provided to identify the lands in question.} accompanying documentation provided[Yes]
The application planning audin order to	ant is advised that notwithstanding the completion of the above application form, that thority may require the applicant to submit further information with regard to the re enable the authority to issue the declaration on the question.
The applica	nt is also advised that the Authority may also request other persons, other than the submit information on the question which has arisen and on which the declaration is
	USE ONLY
R OFFICE	
Date Receiv	ved Fee of €80.00 Paid. Tyes! / [No!
Date Receiv	ved Fee of €80.00 Paid. [Yes] / [No] wledged Reference No.: -ED-
Date Receiv	red
Date acknown	ved Fee of €80.00 Paid. [Yes] / [No] wledged Reference No.: -ED-

APPLICATION FORM: ADDITIONAL CONTACT INFORMATION: See next page, which must be completed.

APPLICATION FORM continued: <u>ADDITIONAL CONTACT INFORMATION</u> NOT TO BE MADE AVAILABLE TO THE GENERAL PUBLIC WITH APPLICATION

Please note:

- The applicant's address <u>must</u> be submitted on this page.
- If the applicant/agent wishes to submit additional contact information, this may be included here.
- This page will not be published as part of the planning file.

8. Appli	icant:
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Address (Required)	Rathfarnham, Dublin 16,
Telephone No.(optional)	
Email Address (if any)	
Fax No.(if any)	

9. Person/Agent acting on behalf of the Applicant (if any):

Name and Address	n/a
Telephone No. (optional)	n/a
Email Address (if any)	n/a
Fax No. (if any)	n/a

(Please note that if the answer is 'No', all correspondence will be sent to the Applicant's address)

Yes [] No [X]

10. Person responsible for preparation of any Drawings and Plans accompanying the application:

Name and Address	Michael Hand, Rathfarnham, Dublin 16,	
Telephone No.(optional)		
Email Address (if any)		
Fax No. (if any)	11/a	

11. Owner (required where applicant is not the owner):

Name of Owner (Required	n/a
Address (required)	
Telephone No.(optional)	
Email Address (if any)	