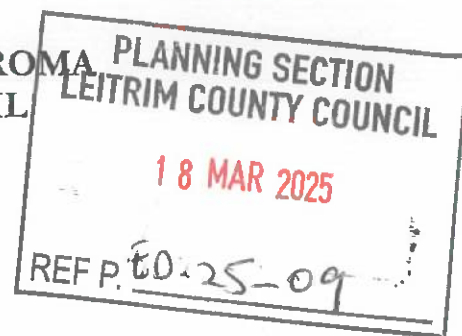


COMHAIRLE CHONTAE LIATROMA  
LEITRIM COUNTY COUNCIL



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] Gary Bohan
2. Postal Address of Property /Site or Building to which the declaration sought relates  
19 Errew Drive, Lough Ryan, Mohill,  
Co. Leitrim N41 HH02
3. Applicant's legal interest in the land or structure. [Give details]  
Owner
4. State whether or not the applicant is the owner of the property in question ☒ [Yes] or [No] and if {No} please provide the information under item 11 at the end of this form
5. State if owner / occupiers are aware of the current application for Declaration under S 5 of the Act ☒ [Y] / [N]
6. 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] or [No]
7. Provide full description of the question /matter / subject which arises wherein a declaration on the question is sought? Exemption from planning permission.  
We wish to build an extension under 40 metres  
squared to the rear of the property. This will not  
exceed the boundaries of the property or  
the height of the property that it is being  
built onto.  
We have attached two drawings to demonstrate  
our proposal.



**APPLICATION FORM continued:****ADDITIONAL CONTACT INFORMATION****NOT TO BE MADE AVAILABLE TO THE GENERAL PUBLIC WITH APPLICATION****Please note:**

- The applicant's address **must** 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- This page will not be published as part of the planning file.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. Applicant:**

Address (Required)	
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)	
Email Address (if any)	
Fax No. (if any)	

**Should all correspondence be sent to the Agent's address? (please tick appropriate box)**  
(Please note that if the answer is 'No', all correspondence will be sent to the Applicant's address)  
Yes ☐ No ☐

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

Name and Address	As above.
Telephone No. (optional)	
Email Address (if any)	
Fax No. (if any)	

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

Name of Owner (Required)	Gary Bohan
Address (required)	
Telephone No. (optional)	
Email Address (if any)	