

KENT COUNTY COUNCIL
REGISTER OF DEPOSITS



KCC Reference number: **TH/ROW4/HQ/465**

- ✓ Highways Statement
- ✓ Highways Declaration

Date Deposit application received: **14/06/2018**

Date on which any Highways Declaration expires: **19/06/2038**

.....

Details of the land:

Districts	Swale
Parishes	Faversham
Address & postcode of buildings on land parcels	Hollowshore House, Hollowshore, Faversham, Kent, ME13 7TU
Nearest town/city	Faversham
OS 6-figure grid reference	TR 017 634

KCC Contact: Definitive Map Officer

Tel: 03000 41 71 71

Email: prow@kent.gov.uk

PART A:

**Information relating to the applicant and land to which the application relates
(all applicants must complete this Part)**

1. Name of appropriate authority to which the application is addressed

Kent County Council

2. Name and full address (including postcode) of applicant:

Marion Tester
Hollowshore House
Hollowshore
Faversham ME13 7TU

3. Status of applicant (tick relevant box or boxes):

I am

(a) the owner of the land(s) described in paragraph 4.

(b) making this application and the statements/declarations it contains on behalf of...2005 Tester Family Settlement Trust..... who is the owner of part of the land(s) described in paragraph 4 and in my capacity as Trustee

4. Insert description of the land(s) to which the application relates (including full address and postcode):

Private road to Hollowshore House, Hollowshore Boatyard and Shipwrights Arms Hollowshore Seawall ,dyke and creek frontage all shown edged in red on map. Hollowshore House, Hollowshore, Faversham, Kent ME13 7TU

5. Ordnance Survey six-figure grid reference(s) of a point within the area of land(s) to which the application relates (if known):

6. This deposit comprises the following statement(s) and/or declarations (tick all that apply):

Part B (Highways Statement)

Part C (Highways Declaration)

Part D (Landowner Statement)

PART B:
Statement under section 31(6) of the Highways Act 1980

[IMarion Tester.....

am the owner of the land described in paragraph 4 of Part A of this form and shown edged inRED..... on the map accompanying this statement.

(delete wording in square brackets as appropriate and/or insert information as required)

Ways shown.....YELLOW on the accompanying map are public footpaths.]

No other ways over the land shown edged in ...RED..... on the accompanying map have been dedicated as highways.

(delete wording in square brackets as appropriate and/or insert information as required)

PART F:

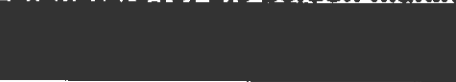
Statement of Truth

(all applicants must complete this Part)

WARNING: If you dishonestly enter information or make a statement that you know is, or might be, untrue or misleading, and intend by doing so to make a gain for yourself or another person, or to cause loss or the risk of loss to another person, you may commit the offence of fraud under section 1 of the Fraud Act 2006, the maximum penalty for which is 10 years' imprisonment or an unlimited fine, or both.

I BELIEVE THAT THE FACTS AND MATTERS CONTAINED IN THIS FORM ARE TRUE

Signature (of the person making the statement of truth):

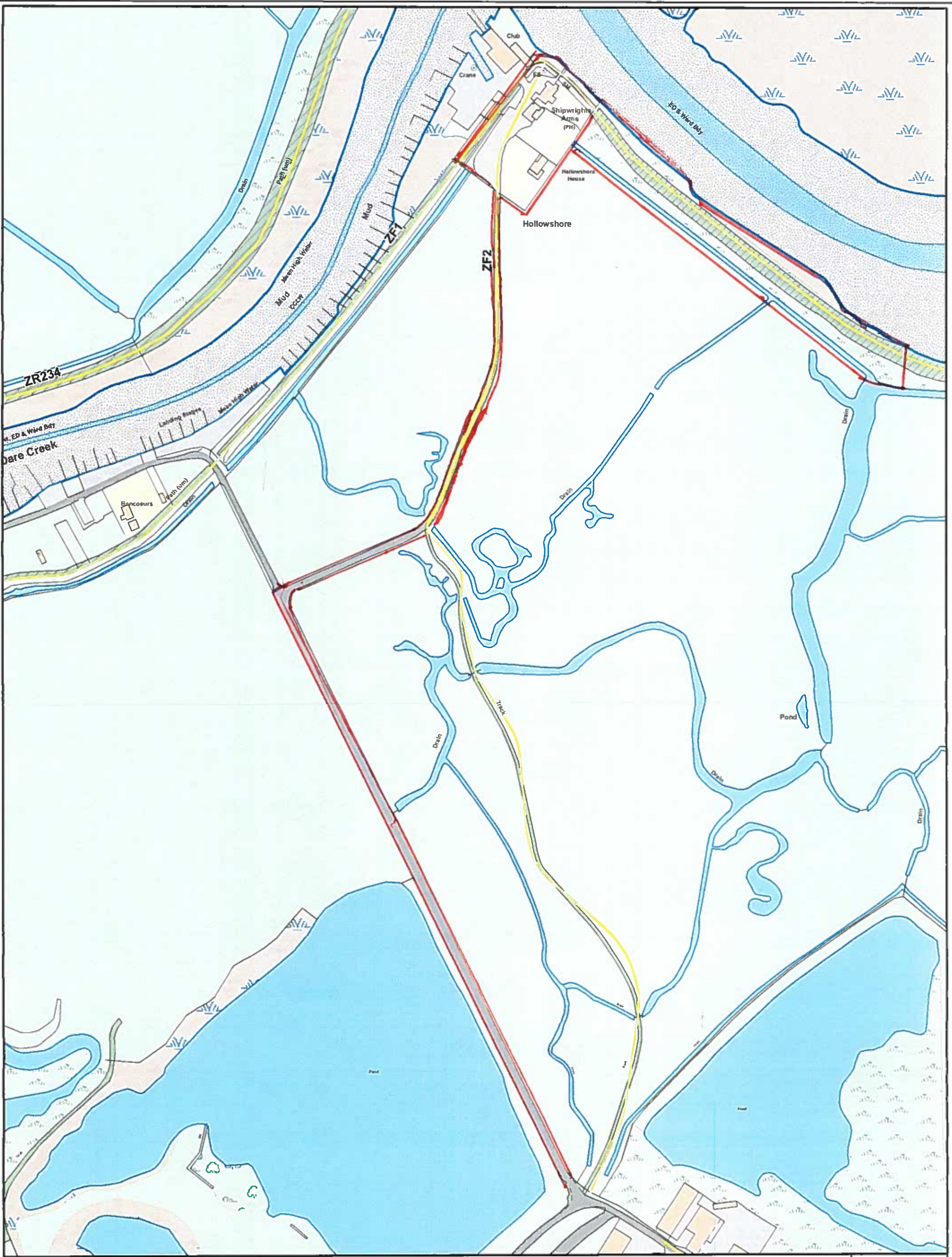


Print full name:

WARLOW ANNE TESTER .

Date: 7/6/2018

You should keep a copy of the completed form



Key

Public Footpath

Produced by the KCC Public Rights of Way and Access Service

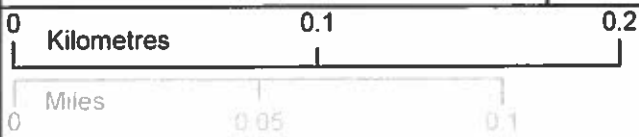
Please note: this map extract is not a legal record of the alignment or existence of a public right of way. No measurements should be taken from it.

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N



1:2,500



Created by:	MMcL	Issue Date:	05/06/2018
Checked by:		Reference:	



PART A:

**Information relating to the applicant and land to which the application relates
(all applicants must complete this Part)**

1. Name of appropriate authority to which the application is addressed

Kent County Council

2. Name and full address (including postcode) of applicant:

Marion Tester
Hollowshore House
Hollowshore
Faversham ME13 7TU

3. Status of applicant (tick relevant box or boxes):

I am

(a) the owner of the land(s) described in paragraph 4.

(b) making this application and the statements/declarations it contains on behalf of...2005 Tester Family Settlement Trust..... who is the owner of part of the land(s) described in paragraph 4 and in my capacity as Trustee

4. Insert description of the land(s) to which the application relates (including full address and postcode):

Private road to Hollowshore House, Hollowshore Boatyard and Shipwrights Arms Hollowshore Seawall ,dyke and creek frontage all shown edged in red on map. Hollowshore House, Hollowshore, Faversham, Kent ME13 7TU

5. Ordnance Survey six-figure grid reference(s) of a point within the area of land(s) to which the application relates (if known):

6. This deposit comprises the following statement(s) and/or declarations (tick all that apply):

~~Part B (Highways Statement)~~

Part C (Highways Declaration) ✓

Part D (Landowner Statement)

PART C:
Declaration under section 31(6) of the Highways Act 1980

1. Marion Tester and the 2005 Tester Family Settlement Trust.....are.....the owners of the land described in paragraph 4 of Part A of this form and shown edged in**RED**..... on the map lodged with ...Kent County ... Council on14/06/2018.....

2. On the 14th day ofJune 2018....., / Marion Tester and...The Tester 2005 Family Settlement Trust deposited withKent County.... Council, being the appropriate council, a statement accompanied by a map showingMarion Tester and The 2005 Tester Family Settlement Trust.....own the. property edged in**RED**..... which stated that:

[the ways shown**YELLOW**..... on that map and on the map accompanying this declaration have been dedicated as footpaths no other ways have been dedicated as highways over Marion Tester and The 2005 Tester Family Settlement Trust property

4. No additional ways have been dedicated over the land edged in**RED**..... on the map referenced in paragraph 1 above since the statement deposited on.....14/6/2018..... and at the present time [I/...Marion Tester and The 2005 Tester Family Settlement Trust..... have no intention of dedicating any more public rights of way over the property.

PART F:

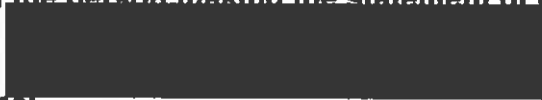
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I BELIEVE THAT THE FACTS AND MATTERS CONTAINED IN THIS FORM ARE TRUE

Signature (of the person making the statement of truth):

A black rectangular box redacting the signature of the person making the statement of truth.

Print full name:

MARION ANNE TESTER

Date:

18/6/2018

You should keep a copy of the completed form