Application for Planning Permission. Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority'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.

Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: First name:
Last name:	Last name:
Company (optional):	Company (optional):
Unit: House number: House suffix:	Unit: House number: House suffix:
House name:	House name:
Address 1:	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town:
County:	County:
Country:	Country:
Postcode:	Postcode:
3. Description of the Proposal Please describe the proposed development, including any change of	f use:
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? If Yes, please state the date when the building, work	Yes No
or change of use was completed: (DD/MM/YYYY):	(date must be pre-application submission)

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House House suffix:	authority about this application? Yes No
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1:	application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town:	
County:	Reference:
Postcode (optional):	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	Details of pre-application advice received:
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway? Yes No	Do the plans incorporate areas to store and aid the collection of waste? Yes No
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway?	
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?	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made for the separate storage and
creation of rights of way?	collection of recyclable waste? 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)	If Yes, please provide details:
8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff	Do any of these statements apply to you? Yes No
(d) related to an elected member If Yes, please provide details of the name, relationship and role	
ir res, prease provide details of the fiame, relationship and role	

	Existing (where applicable)			Proposed		Not applicable	Don't Know
Walls							
Roof							
Windows							
Doors							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing							
Lighting							
Others (please specify)							
Are you supplying add f Yes, please state refe		•	_	 /design and access stateme	nt? Yes		No
10. Vehicle Parkin		ing and proposed	number of o	o cito parking chaocs			
Type of Vehic		Total	Tota	n-site parking spaces: I proposed (including	Difference		
Cars		Existing		spaces retained)	in spaces		
Light goods vehi public carrier veh Motorcycles							
Disability space	ces						
Cycle spaces							
Other (e.g. Bu							
Other (e.g. Bu	ıs)						

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes No
plain(s)/ drawing(s).	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant? Yes No
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development No	When did this use end (if known)? DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate)
Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance: Yes, on the development site	Land where contamination is suspected for all or part of the site? Yes No
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable
No	to the presence of contamination?
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
of the local landscape character? Yes No	
If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a	
Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning	
authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to	
design, demolition and construction - Recommendations'.	\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

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Houses	Proposed Housing								1				Dode		Toto	
Houses			1		1			Total								Tota
Live-work units	Houses							а	Houses							а
Cluster flats	Flats and maisonettes							Ь	Flats and maisonettes							b
Sheltered housing	Live-work units							С	Live-work units							С
Bedsit/studios	Cluster flats							d	Cluster flats							d
Unknown type	Sheltered housing							е	Sheltered housing							е
Not	Bedsit/studios							f	Bedsit/studios							f
Not Not	Unknown type							g	Unknown type							g
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Live-work units																a
Cluster flats																b
Sheltered housing																С
Bedsit/studios																d
Unknown type								е								е
Totals (a + b + c + d + e + f + g) = B								f								f
Intermediate	Unknown type			<u> </u>			_ ,		Unknown type							9
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Live-work units	Houses							а	Houses							а
Cluster flats	Flats and maisonettes							b	Flats and maisonettes							b
Sheltered housing	Live-work units							С	Live-work units							С
Bedsit/studios	Cluster flats							d	Cluster flats							d
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Key worker Not known Number of Bedrooms Total value Houses Image: State and maisonettes in the control of	Unknown type							g	Unknown type							g
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Houses	Key worker						1		Key worker			_	1		1	Tota
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Live-work units																b
Cluster flats																1
Sheltered housing																C d
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i		10	υιais	(d + k)) + C +	u + e	+ i + g) =	U		- 10	υιais	(d + l) + C +	u + e	+ i + g) =	Н

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

	<i>J</i> .	•		in or change of t	•		pace?] Yes [No
If you	u have answe	ered Yes to th		estion above ple	ase add details	in the follow	ing table:		
Us	se class/type	of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by use or der (square n	change of nolition	floorspace (including	ss internal e proposed g change of are metres)	Net additional gross internal floorspace following development (square metres)
A1	Sh	ops							
	Net trad	able area:							
A2	Financ profession	cial and nal services							
A3	Restaurant	ts and cafes							
A4	Drinking est	tablishments							
A 5	Hot food	takeaways							
B1 (a)	Office (oth	er than A2)							
B1 (b)		rch and opment							
B1 (c)		ndustrial							
B2	General	industrial							
B8	Storage or	distribution							
C1		nd halls of lence							
C2		institutions							
D1		sidential utions							
D2		and leisure							
OTHER									
Please Specify									
	To	otal							
In add	dition, for ho	tels, resident	ial ins	stitutions and ho	stels, please ad	ditionally inc	dicate the los	s or gain of	rooms
Use class	Type of use	Not applicable	Existi	ng rooms to be of use or dem	lost by change nolition	Total room ch	ns proposed (nanges of use	(including	Net additional rooms
C1	Hotels								
C2	Residential Institutions								
OTHER									
Please Specify									
19. Em	ployment								
Please co	omplete the	following inf	ormat	tion regarding e	mployees:		1		
				Full-time	Part	-time			al full-time quivalent
Exi	isting emplo	yees							
Pro	posed emplo	oyees							
20. Ho	urs of Ope	ning							
Pleas	se state the h	ours of open	ing fo	or each non-resid	dential use prop	osed:			1
Use Monday to Friday Saturday						у	Sunday Bank Ho		Not known
21. Site	e Area								
Please st	ate the site a	rea in hectar	es (ha)					

22. Industrial or Commercial Processes and Machinery							
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:							
Is the proposal a waste management develo	pment? Yes	☐ No					
If the answer is Yes, please complete the foll	owing table:						
	including eng	pacity of the void in gineering surcharge a or cover or restoratio blid waste or litres if I	and making no on material (or	Maximum annual op throughput in to (or litres if liquid v	nnes		
Inert landfill							
Non-hazardous landfill							
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant							
Pyrolysis/gasification							
Metal recycling site							
Transfer stations							
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites							
Open windrow composting							
In-vessel composting							
Anaerobic digestion							
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works							
Other treatment							
Recycling facilities construction, demolition and excavation waste							
Storage of waste							
Other waste management							
Other developments							
Please provide the maximum annual operat	ional throughput of	the following waste:	streams:				
Municipal							
Construction, demolition and e	excavation						
Commercial and industr	rial						
Hazardous							
If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.							
23. Hazardous Substances							
Does the proposal involve the use or storage of any of the following materials in the quantities stated below? Yes No Not applicable							
If Yes, please provide the amount of each substance that is involved:							
Acrylonitrile (tonnes)	Ethylene oxide	(tonnes)	Phosgene (tonnes)				
Ammonia (tonnes)	Hydrogen cyanide	(tonnes)	Sul	phur dioxide (tonnes)			
Bromine (tonnes)	Liquid oxygen	(tonnes)	nes) Flour (tonnes)				
Chlorine (tonnes) Lie	quid petroleum gas	(tonnes)	Refined	l white sugar (tonnes)			
Other:		Other:					
Amount (tonnes):		Amount (ton	nes):	\$Date:: 2013-04-30 #\$ \$Revisio	p: 5504 \$		

24. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner * of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding **

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
I certify/ The applicant certifies that I ha 21 days before the date of this application application relates. * "owner" is a person with a freehold intere	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2010 Celebrate ve/the applicant has given the requisite notice to everyone else on, was the owner* and/or agricultural tenant** of any part of est or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1990	e (as listed below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. one "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served Address** Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent: CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 25. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted. The original and 3 copies of a completed and dated The correct fee: application form: The original and 3 copies of a design and access statement, The original and 3 copies of the plan which identifies if required (see help text and guidance notes for details): the land to which the application relates drawn to an identified scale and showing the direction of North: The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 12 Certificate (Agricultural Holdings): The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:

Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): (date cannot be pre-application) 27. Applicant Contact Details Telephone numbers Country code: National number: Country code: National number: Country code: Mobile number (optional): Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): 29. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No Other (if different from the agent/applicant's details)	26. Declaration		
27. Applicant Contact Details Telephone numbers Country code: National number:	I/we hereby apply for planning permission/conseinformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.	ent as described in th /our knowledge, any	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
27. Applicant Contact Details Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Other (if different from the agent/applicant's details) of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Agent Applicant Other (if different from the agent/applicant's details) of the plans been selected, please provide:	Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
Telephone numbers Country code: National number:			
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (opt	27. Applicant Contact Details		28. Agent Contact Details
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Other (if different from the out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Telephone numbers		Telephone numbers
Country code: Fax number (optional): Email address (optional): Other public land? Yes No If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Country code: National number:		
Email address (optional): Other (if different from the out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Country code: Mobile number (optional):		Country code: Mobile number (optional):
29. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Agent Applicant General Applicant's details) If Other has been selected, please provide:	Country code: Fax number (optional):		Country code: Fax number (optional):
Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: No Other (if different from the agent/applicant's details)	Email address (optional):		Email address (optional):
Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: No Other (if different from the agent/applicant's details)			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: Agent Applicant Other (if different from the agent/applicant's details)	29. Site Visit		
out a site visit, whom should they contact? (Please select only one) Agent Applicant agent/applicant's details)	Can the site be seen from a public road, public fo	ootpath, bridleway or	r other public land? Yes No
	out a site visit, whom should they contact? (Pleas	intment to carry se select only one)	
Contact name: Telephone number:	If Other has been selected, please provide:		Tabahasa asarahas
	Contact name:		reiepnone number:

Email address: