SOUTH HOLLAND DISTRICT COUNCIL

# Application for Outline Planning Permission with all matters reserved.
# Town and Country Planning Act 1990

**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.

## 1. Applicant Name, Address and Contact Details

Title: | First name: | Surname:

Company name: Crowland Parish Council

Street address: c/o Robert Doughty Consultancy Ltd

Town/City:

County:

Country: United Kingdom

Postcode:

| | Country Code | National Number | Extension Number |
|---|---|---|---|
| Telephone number: | | | |
| Mobile number: | | | |
| Fax number: | | | |

Email address:

Are you an agent acting on behalf of the applicant? (•) Yes ( ) No

## 2. Agent Name, Address and Contact Details

Title: Mrs | First Name: Julie | Surname: Robinson

Company name: Robert Doughty Consultancy Limited

Street address: 32 High Street

Helpringham

Town/City: Sleaford

County: Lincolnshire

Country: United Kingdom

Postcode: NG34 0RA

| | Country Code | National Number | Extension Number |
|---|---|---|---|
| Telephone number: | | 01529 421646 | |
| Mobile number: | | | |
| Fax number: | | 01529 421358 | |

Email address: planning@rdc-landplan.co.uk

## 3. Description of the Proposal

Please describe the proposal:

Proposed Residential Development, Replacement Allotments and New Cemetery Including Woodland Burial Plots, Associated Infrastructure and New Accesses.

Has the building or works already been carried out? ( ) Yes (•) No

## 4. Site Address Details

Full postal address of the site (including full postcode where available)

House: Suffix:

House name:

Street address: Land off James Road

Crowland

Town/City: Peterborough

County: Lincolnshire

Postcode:

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

Easting: 524390

Northing: 309876

Description:

Land north and south of James Road, Crowland

## 5. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the 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.) ◉ Yes ○ No

If Yes, you will need to submit an appropriate flood risk assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? ◉ Yes ○ No

Will the proposal increase the flood risk elsewhere? ○ Yes ◉ No

How will surface water be disposed of?

☐ Sustainable drainage system ☐ Main sewer ☐ Pond/lake

☒ Soakaway ☐ Existing watercourse

## 6. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ○ Yes ◉ No

## 7. 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
(d) related to an elected member

Do any of these statements apply to you? ○ Yes ◉ No

## 8. Site Area

What is the site area? 04.35 hectares

## 9. Residential Units

Does your proposal include the gain or loss of residential units? ◉ Yes ○ No

**Market Housing - Proposed**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | 30 |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Proposed Market Housing Total 30

**Market Housing - Existing**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Existing Market Housing Total 0

## 9. Residential Units (continued)

**Social Rented Housing - Proposed**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | 8 |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Proposed Social Rented Housing Total: 8

**Social Rented Housing - Existing**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Existing Social Rented Housing Total: 0

**Intermediate Housing - Proposed**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | 7 |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Proposed Intermediate Housing Total: 7

**Intermediate Housing - Existing**

| | Number of bedrooms | | | | |
|---|---|---|---|---|---|
| | 1 | 2 | 3 | 4+ | Unknown |
| Houses | | | | | |
| Flats/Maisonettes | | | | | |
| Live-Work units | | | | | |
| Cluster flats | | | | | |
| Sheltered housing | | | | | |
| Bedsit/Studios | | | | | |
| Unknown | | | | | |

Existing Intermediate Housing Total: 0

**Overall Residential Unit Totals**

| | |
|---|---|
| Total proposed residential units | 45 |
| Total existing residential units | 0 |

## 10. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace? ○ Yes ◉ No ○ Unknown

## 11. Employment

If known, please complete the following information regarding employees:

| | Full-time | Part-time | Equivalent number of full-time |
|---|---|---|---|
| Existing employees | 0 | 0 | 0 |
| Proposed employees | 0 | 0 | 0 |

## 12. Hours of Opening

If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed:

| Use | Monday to Friday<br>Start Time End Time | Saturday<br>Start Time End Time | Sunday and Bank Holidays<br>Start Time End Time | Not Known |
|---|---|---|---|---|

## 13. 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:

N/A

Is the proposal for a waste management development? ○ Yes ◉ No

## 14. Existing Use

Please describe the current use of the site:

Allotments and agricultural land

Is the site currently vacant? ○ Yes ◉ No

Does the proposal involve any of the following?
If yes, you will need to submit an appropriate contamination assessment with your application.

Land which is known to be contaminated? ○ Yes ◉ No

Land where contamination is suspected for all or part of the site? ○ Yes ◉ No

A proposed use that would be particularly vulnerable to the presence of contamination? ○ Yes ◉ No

## 15. 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)

◉ The agent ○ The applicant ○ Other person

## 16. Certificates (Certificate A)

**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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of any part of the land to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding *("agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act).*

Title: Mrs First name: Julie Surname: Robinson

Person role: Agent Declaration date: 11/03/2015 ☒ Declaration made

## 17. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

☒ Date 11/03/2015