

PLANNING APPLICATION

For office use only

Application No. H05/0312/97

Date Registered

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR. HORSFIELD
FROSTLEY GATE NURSERY
FROSTLEY GATE
FLEET FEN
LINCS
Tel. No.

NAME AND ADDRESS OF AGENT

(If form completed by agent)

PODDINGTONS
44 DOUBLE STREET
SPALDING
LINCS

Tel. No. 01775 761856

(Personal contact name) J CRUNKHORN

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

FROSTLEY GATE NURSERY, FROSTLEY GATE
FLEET FEN LINCS

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

PROPOSED DOMESTIC GARAGE

Please complete

Signed

Date

4/3/97

£90-

Please tick one box and answer the extra questions under that section**2. TYPE OF APPLICATION**This is a **full** application for change of use and/or new building worksor This is an **outline** application

Please state Site Area

(hectares)

Please tick **any** box where you are including details which you wish to be considered in this application.

Siting

Design

External Appearance

Means of Access

Landscaping

Now complete Parts 3 and 5 and an Ownership Certificate.

or This is a **reserved matters** application.

A. Please state Reference Number of outline permission

B. Please state which reserved matters are dealt with in this application.

Now complete Part 4 only

or This is an application for **renewal** of temporary permission or **continuation** without complying with planning condition

A. Please state reference Number of previous permission

B. Please state Condition Number referred to

Now complete an Ownership Certificate

or This is an application for **modification** of a continuing planning permission which has not yet been imposed

A. Please state Reference Number of previous permission

B. Please state Condition Number referred to

C. Please state variation required

Now complete an Ownership Certificate

OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THREE SECTIONS.

1. APPLICANT'S INTEREST

Fill in your interest in site (e.g. owner, prosp. purchaser)

There is no need to include in this section names and other details of your contacts

OWNER

2. OWNERSHIP OF THE SITE

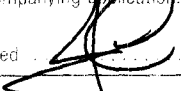
This section is to make sure that the owners of land are aware of applications made on it.

If the applicant is the **sole owner of the whole site**, complete **Certificate A**.

In any other case (i.e. if the applicant is a prospective purchaser, or a tenant, or a joint owner, or the sole owner of only part of the site) then you must give notice to all other owners, and complete **Certificate B**.

Where there is a person having a freehold interest, or having a leasehold interest where seven years or more remain unexpired, if you are unable to trace the owner, please contact the Planning Office as a notice and certificate will be required.

Certificate A Nobody except the applicant was an owner of any part of the land to which the application relates at the beginning of the period of 21 days ending with the date of the accompanying application.

Signed  (Applicant / Agent) Date **4/3/97**

Certificate B The applicant has given the required notice to everyone else who were owners of any part of the land to which the application relates at the beginning of the period of 21 days ending with the date of the accompanying application.

Owner's Name:

Address of owner at which notice was served: State Date notice served:

Signed (Applicant / Agent) Date

3. AGRICULTURAL HOLDINGS CERTIFICATE

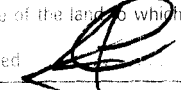
If the land is used for agricultural use complete Certificate 1.

If the land is used for agriculture but farmed by the owner and there is no agricultural tenant, complete Certificate 1.

If the land is used for agriculture and is an agricultural holding, you must give notice to the tenant, and complete Certificate 2.

If you are the sole agricultural tenant yourself, sign certificate 2 but insert 'not applicable' in the following spaces.

Certificate 1 None of the land to which the application relates is or is part of any agricultural holding.

Signed  (Applicant / Agent) Date **4.3.97**

Certificate 2 The applicant has given the required notice to every other person who, at the beginning of the period of 21 days ending with the date of the application, was a tenant of an agricultural holding on all or part of the land to which the application relates.

Tenant's Name:

Address of tenant at which notice was served: State Date notice served:

Signed (Applicant / Agent) Date

TYPE OF DEVELOPMENT

3. A. Please state whether the proposal involves:-

(Tick one or more boxes)

- (i) New Dwellings
(ii) Other new building(s)
(iii) Alterations or extension
(iv) Change of use

☐
☒
☐
☐

If so, how many:

GARAGE

4. A. Please state site area (in all cases)

hectares

B. If building works are proposed, please state extra floor space to be created:

39.97 sq. metres

C. Please state size of any new structure:- (a) max. height:
(b) max. length:
(c) max. width:

5.6 metres
6.63 metres
6.03 metres

D. Please state type and colour of materials for facing external walls:

E. Please state type and colour of roofing materials:

F. Has a survey of the site been undertaken? State Yes or No

**TO MATCH EXISTING
YES DWELLINGS**

5. **GENERAL INFORMATION** Please complete each section

EXISTING USES

Please state existing or, if vacant, the last use(s) of site:

**VEHICULAR PARKING /
TURNING AREA**

ACCESS TO ROADS (VEHICULAR AND PEDESTRIAN)

Please tick one box

A. There will be no new access to a public road and no alteration to any existing access to a public road

☒

or

B. There will be a new or altered access to a public road

☐

If so, name of road:
Will there be:

Individual access: ☐
New estate road: ☐

C. What provision will be made for garages or parking within the site?

AS EXISTS & PURPOSE APPLICATION

TREES Please tick one box

A. The proposal does not involve the felling of any trees

☐

B. The proposal does involve the felling of one or more trees

☒

→ If so, please show details on plans

DRAINAGE Please complete

A. Please state how surface water will be disposed of

SOAKAWAYS

B. For estate developments, please state how highway surface water will be disposed of

N/A

C. Please state whether a land drain will be affected

NO

D. Foul sewerage will be disposed of to:

Mains sewer ☐

Cesspool ☐

N/A

Septic tank ☐

PLEASE COMPLETE IN ALL CASES

State Yes or No

The proposal is in connection with agriculture

NO

→ If so, please give details in Part 6

The proposal affects a listed building

NO

The proposal affects a public right of way

NO

The proposal is known to affect contaminated or tiled land

NO

The proposal is for industrial, warehousing, offices,

NO

shops, etc. for non-commercial purposes.

NO

→ If so, please complete Part 7

In case of a substantial change will be required,

NO

please state whether you have sent a copy of the application to the council yourself. If yes, please give date sent

NO

Date:
Consultants:

Is this application related to a previous submission?

NO

Application No:

5. **ANY OTHER INFORMATION** Please add any details you wish in support of your application.

Continue on separate sheet if necessary.