FOUR COPIES REQUIRED

PLANNING APPLICATION

For office use only

Application No. HOS/0422/97

Date Registered 17 : 7

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MESDAMES BANKS & LEONARD
C/O STOCKSELL GATE
WHAPLODE
SPALDING
LINCS.
Tel. No.

NAME AND ADDRESS OF AGENT

If form completed by agent

G R MERCHANT
UNIT 4, WRIGHTS MEWS
12A PARK ROAD
HOLBEACH
Tel. No. 01406 [illegible]
(Personal contact name)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

BRANCHES LANE, FLEET, HOLBEACH.

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

PROPOSED DAY NURSERY.

Please complete

Attach * four copies of the [illegible]
* any supporting [illegible]
* a fee of £ 540

Signed... G.Merchant... Date 14.4.97.

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 works ✓

or This is an **outline** application

Please state Site Area [illegible]

Please tick **any** box where you are including details which you wish to be [illegible] 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 condition of planning permission which has not yet been implemented

A. Please state Reference Number of permission [illegible]
B. Please state Condition Number referred to
C. Please state variation required
Now complete an Ownership Certificate

7. **INDUSTRIAL, WAREHOUSING, OFFICES OR SHOPS** Please complete if appropriate

Please tick **one** box and complete B if necessary

A. The proposal does not involve any alteration in existing floorspace ☐

B. The proposal involves the creation of ~~or an alteration in~~ total **gross** floorspace ☐

Proposed total gross floorspace: 158 sq. m | Previous total gross floor space: — sq. m

This new total includes the following net floorspace:

Retail: — sq. m | Office: — sq. m | Industrial: — sq. m | Warehousing: — sq. m

Other: 158 sq. m = | If so, please state use: DAY NURSERY.

	Office Staff	Industrial staff	Other staff
How many office, industrial and other staff will be employed on the site as a result of the development proposed? If you have existing premises on the site, how many of the employees will be new staff?			4.
If you propose to transfer staff from other premises please give details of the numbers involved and of the premises affected.	N/A.		
In the case of industrial development, give a description of the processess to be carried out and of the end products, and the type of plant or machinery to be installed.	N/A.		
If the proposal forms a stage of a larger scheme for which planning permission is not at present sought, please give what information you can about the ultimate development.	N/A.		
Is the proposal related to an existing use on or near the site?	State Yes or No: NO		
If so, please explain the relationship.	N/A.		
Is this a proposal to replace existing premises in this area or elsewhere which have become obsolete or decrepit or otherwise unsatisfactory?	State Yes or No: NO.		
If so, please give details including gross floor area of such premises and state your intentions in respect of those premises.	N/A.		
What provisions have been made for the parking, loading and unloading of vehicles within the curtilage of the site? (Please show the location of such provision on the plans and distinguish between parking for operational needs and other purposes)	AS DETAILED ON PLAN		
What is the estimated vehicular traffic flow to the site during a normal working day? (Please include all vehicles except those used by individual employees driving to work)	MAX 30 CARS TWICE A DAY AT VARYING TIMES BETWEEN 8.00AM AND 6.00PM.		
What is the nature, volume and proposed means of disposal of any trade effluents or trade refuse?	N/A.		
Will the proposed use involve the use or storage of any hazardous materials?	State Yes or No: NO. *If yes, you may need to apply for Hazardous Substances Consent*		
What provision is being made for access to premises for the disabled?	TOTAL ACCESS.		

TYPE OF DEVELOPMENT

3. A. Please state whether the proposal involves:- (Tick one or more boxes)

(i) New Dwellings		If so, how many:
(ii) Other new building(s)	✓	
(iii) Alterations or extension		
(iv) Change of use		

4. A. Please state site area (in all cases)		hectares
B. If building works are proposed, please state extra floor space to be created:		sq. metres
C. Please state size of any new structure:- (a) max. height:	5.5.	metres
(b) max. length:	15.7.	metres
(c) max. width:	13.3.	metres
D. Please state type and colour of materials for facing external walls:	BUTTERLEY OLD ENGLISH ROSE SAN DTOY CALDERDALE SLATES - GREY.	
E. Please state type and colour of roofing materials.		
F. Has a survey of the site been undertaken? State Yes or No	YES	

5. GENERAL INFORMATION Please complete each section

EXISTING USES
Please state existing or, if vacant, the last use(s) of site.

ENGINEERING WORKS / GARAGE.

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: BRANCHES LANE.
Will there be—
Individual access(es) ✓
New estate road ☐

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

AS DETAILED ON PLAN

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 —

C. Please state whether a land drain will be affected — NO.

D. Foul sewerage will be disposed of to:
Mains sewer ✓ Cesspool ☐ Septic tank ☐

PLEASE ANSWER IN ALL CASES

	State Yes or No	
The proposal involves agricultural development or the change of use of agricultural land.	NO	➡ If so, **please give details in Part 6**
The proposal involves the demolition of a building	NO	
The proposal involves the stopping up or diversion of a public right of way	NO	
The proposal is likely to affect contaminated or filled land	NO	
The proposal is for industrial, warehousing, offices, shopping or similar commercial purposes.	YES.	➡ If so, **please complete Part 7**
In order to speed up the statutory consultation will be required, please state whether you have sent a copy of the application to the consultee yourself. If yes, please give date sent.	NO	➡ Date: Consultee(s)
Is this application related to a previous submission?	NO	➡ Application No.

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

Continue on separate sheet if necessary.

OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THREE SECTIONS.

1. **APPLICANT'S INTEREST**
Please state interest in site (e.g. owner, prosp. purchaser)
(Please remember to indicate on the location plan any other land under your control)

OWNER WITH R. NENE.

2. **OWNERSHIP OF THE SITE**

This certificate 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.**
(An "owner" is a person having a freehold interest, or having a leasehold interest where seven years or more remains unexpired). If you are unable to trace the owner, please contact the Planning Office as a different 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 .....

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: T. STOKES & R. NENE.

Address of owner at which notice was served:
STOCKWELL CENTRE
CORNFIELDS
STRATFORD
E15 3.

State Date notice served:
14.4.97

Signed J. Morrison (~~Applicant~~ / Agent) Date 14.4.97

3. **AGRICULTURAL HOLDINGS CERTIFICATE**

If the land is not in agricultural use complete Certificate 1.
If the land is agricultural, but farmed by the owner and there is no agricultural tenant, complete Certificate 1.
If the site does relate to 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 tenant details.

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

Signed J. Morrison (~~Applicant~~ Agent) Date 14.4.97

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 .....