PLANNING APPLICATION

For office use only

Application No H08/0324/98

Date Registered 24 MAR 1998

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Ms H MADDISON
2, RUSZIATE ROAD
GOSBERTON RUSZIATE
SPALDING
LINCOLNSHIRE

Tel No 01775 760125

NAME AND ADDRESS OF AGENT

(if form completed by agent)

TREVOR A CLAY RIBA
CHARTERED ARCHITECT
14 OLD FENNIKE ROAD
WESTON HILLS
SPALDING, LINCOLNSHIRE PE12 6DD

Tel No 01406 380027

Personal contact name TREVOR CLAY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

2, RUSZIATE ROAD, GOSBERTON RUSZIATE, SPALDING, LINCS

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

EXTENSIONS TO HOUSE AND CREATION OF WORKSHOP

Four copies of all plans and drawings are required. In case of applications for outline permission, only one copy of the plan is required.

Signed Ms H. Maddison Dated 23 March 98

Please answer the following questions in this section.

TYPE OF APPLICATION

Please tick the appropriate box for change of use and/or new building works or for outline application

Note: Applications for Full Permission must be accompanied by Parts 3 and 5 and an Ownership Certificate.

Please see notes on Parts 2, 3 and 5 and Ownership Certificates

Please state whether you are including details which you wish to be considered as part of the application

Design | External Appearance

Landscaping

Please complete Parts 3 and 5 and an Ownership Certificate.

or Application for approval of reserved matters following outline permission

Please complete Part 4 only

or Application for renewal of temporary permission

or Application for removal or variation of a condition following grant of planning permission

Please state Reference Number of previous permission

Please state Reference Number of condition

Please complete Ownership Certificate

or Application for modification of a planning obligation that has not yet been implemented

Please state Reference Number of previous permission

Please state Reference Number relevant to

Please state what modification is required

Please complete 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: 40 sq. m

Previous total gross floor space: ? sq. m

PREVIOUS LIGHT INDUSTRIAL PREMISES HAVE BEEN DEMOLISHED

This new total includes the following net floorspace

Retail: sq. m | Office: sq. m | Industrial: 40 sq. m | Warehousing: sq. m

Other: sq. m ⇒ If so, please state use

	Office Staff	Industrial staff	Other staff
How many office, industrial or 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?		1 - THIS IS THE OCCUPANT OF THE APPLICANTS HOME	
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 retail, industrial or warehouse uses, please describe the processes to be carried out and of the goods to be sold and the type of plant or machinery to be installed.	MICRO MINERAL MASON'S WORKSHOP		
If the proposal forms a single unit with other premises, or if you are planning permission is sought for a change of use, please give what information you can about the existing development	N/A		
Is the proposed development to be carried out in whole or in part? If so, please specify the part to be carried out.	State Yes or No: NO —		
Is the proposed development to be carried out in whole or in part? If so, please specify the part to be carried out.	State Yes or No: NO —		
Will the proposed development involve the loss of any existing residential premises? If so, please give details of the number of units and their present use.	SEE PLAN		
What is the area of the site? Please state whether you have measured the site in square metres or hectares.	0.5		
What is the nature of the soil? Please state whether you have carried out a survey of the soil and, if so, please give details of the survey.	STONE CHIPS + WASTE TAKEN TO DISPOSAL SITE		
Will the proposed development involve the use or storage of hazardous substances?	State Yes or No: NO — If yes, you may need to apply for Hazardous Substances Consent		
What provision is to be made for the parking of cars?	RAMPED ACCESS		

TYPE OF DEVELOPMENT

2 Does the proposal involve: (Tick one or more boxes)

a) New buildings ☐ If so, how many:

b) Other new buildings ☐

c) Alterations or extensions ☑

d) Change of use ☐

3 a) Please state site area (in all cases) SEE PLANS hectares

b) If floor space works are proposed, please state extra floor space to be created SEE PLANS sq. metres

c) Please state dimensions of any new structure: (a) max. height 7.5 approx metres

(b) max. length 15.0 approx metres

(c) max. width 15.0 approx metres

d) Please state type and colour of material for facing external walls RED/BROWN FACINGS TO MATCH EXIST

Please state type and colour of roofing materials CONCRETE DOUBLE ROMAN TILE - TERRA COTTA RED

e) Is any of the site to be undertaken? State Yes or No YES

CULTURAL INFORMATION Please complete each section

RESIDENTIAL + LIGHT INDUSTRIAL

ACCESS (VEHICULAR AND PEDESTRIAN) Please tick one box

a) Is it proposed to provide a public road and no alteration ☐

b) Is it proposed to provide a private road and no alteration ☐

c) Is it proposed to provide a new means of access to a public road ☐

SEE PLANS

d) Is it proposed to provide a new means of access to a private road ☐

e) Is it proposed to provide a new means of access to a footpath, bridleway or restricted byway ☐ If so, please show details on plans

WATER SUPPLY Please complete

A SOMERWATER

B N/A

C NO

D SEPTIC TANK

Is the water supply to be obtained from a mains supply ☐ Septic tank ☑

WASTE WATER DISPOSAL

Please state how foul sewage is to be disposed of

a) To an existing sewer ☐

b) To an existing septic tank ☐

c) To a new sewerage system ☐

d) To a new septic tank drainage system ☐

e) Other method (please specify) ☐

ALL TYPES OF DEVELOPMENT IN ALL CASES

Since you or the applicant purchased the property, to the best of your knowledge, has any part of the application site been used for the storage of toxic or explosive substances? NO If so, please give details in Part 6

Is the application site known to be contaminated land? NO

Is the application site known to be at risk of flooding? NO

Does the proposed development involve the provision of residential accommodation? YES If so, please complete Part 7

(PREVIOUS)

Does the proposed development involve the provision of any non-residential floorspace? ☐

Does the proposed development involve the creation of new dwellings? ☐

ANY OTHER INFORMATION Please attach any other information you wish in support of your application.

OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THREE SECTIONS.

1. APPLICANT'S INTEREST

Please state interest in site (eg. owner, prospective purchaser, tenant)

Please ensure you have completed the correct Certificate and served notice on the correct people

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 locate the owner, please contact the Planning Office as a different type of certificate will be required.

Certificate A I hereby certify that the applicant was the 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 application.

Signed: Ms H Maddison (Applicant / Agent) Date: 23 March 98

Certificate B I have served notice on the following persons 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 application.

Name of owner: State Date notice served:

Name of owner: State Date notice served:

Signed: (Applicant / Agent) Date:

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 and 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' for the tenant details.

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

Signed: Ms H Maddison (Applicant / Agent) Date: 23 March 98

Certificate 2 I have given the requisite 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.

Name of tenant: State Date notice served:

Name of tenant: State Date notice served:

Signed: (Applicant / Agent) Date: