PLANNING APPLICATION

For office use only

Application No. H08/0412/01

Date Registered 4 APR 2001

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR. THOMAS D. FRANCIS
8. CAMBRIDGE GARDENS
GOSBERTON
SPALDING. LINCS. PE11 4HP
Tel. No. 01775. 841016.

NAME AND ADDRESS OF AGENT
(if form completed by agent)

R.N. COWLING MRICS
9. GALWAY CLOSE
SPALDING. LINCS. PE11 3FL.
Tel. No. 01775. 723836.
(Person to contact name) AS ABOVE.

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

8. CAMBRIDGE GARDENS. GOSBERTON. SPALDING. LINCS.

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

ALTERATIONS + EXTENSION TO HOUSE.

Please complete in black ink. Please submit 2 copies of all plans
and 1 ownership certificate (see back page)

Signed R.N. Cowling Date 4th APRIL 2001. £95-00

If you consider no fee is payable include a written explanation instead.

Previous application No.

Please tick one box and answer the extra questions in that section.

2. TYPE OF APPLICATION

		(✓)	
	This is a **full** application for change of use and/or building works	✓	➡ Now complete Parts 3, 4 and 5 and an Ownership Certificate
or	This is an **outline** application		⬇
	Please state Site Area		
	Please list any matters where you are including details which you wish to be considered as part of this application		
	Siting	Design	Means of Appearance
	Means of Access	Landscaping	
	Now complete Parts 3 and 5 and an Ownership Certificate		
or	This is a **reserved matters** application		⬇
	Please state Reference Number of outline permission		
	Please state which reserved matters are the subject of this application		
	Now complete Part 4 only		
or	This is an application for **renewal** of temporary permission or **continuation** without complying with planning condition		⬇
	Please state Reference Number of previous permission		
	Please state Condition Number referred to		
	Now complete an Ownership Certificate		
or	This is an application for **modification** or removal of a planning condition which has not yet been complied with		⬇
	Please state Reference Number of previous permission		
	Please state Condition Number referred to		
	Please state modification required		
	Now complete an Ownership Certificate		

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 buildings		
(iii) Alterations or extension	✓	
(iv) Change of use		

4. A. Please state site area (in all cases)	0.0325 hectares
B. If building works are proposed, please state extra floor space to be created:	40.74 sq. metres
C. Please state size of any new structure:- (a) max. height:	2.90 metres
(b) max. length:	5.75 metres
(c) max. width:	7.95 metres
D. Please state type and colour of materials for facing external walls:	FACING BRICK TO MATCH EXG.
E. Please state type and colour of roofing materials	DARK GREY \ POLY ROOF 185'
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.

PRIVATE RESIDENTIAL.

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(es) / New estate road
C. What provision will be made for garages or parking within the site?	EXISTING DRIVE.	

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	TO SOAKAWAY(S).
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 ☐ 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 filled land	NO	
The proposal is for industrial, warehousing, offices, shopping or similar commercial purposes	NO	➡ If so, **please complete Part 7**
In cases where a 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.	N.A.	➡ 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.

INDUSTRIAL, WAREHOUSING, OFFICES OR SHOPS Please complete if appropriate

Please tick and complete B if necessary

does not involve any alteration in existing floorspace ☐

involves the creation or an alteration in total **gross** ☐

Previous total gross floor space sq. m.

industrial sq. m. Warehousing sq. m.

	Office Staff	Industrial staff	Other staff

State Yes or No

State Yes or No

State Yes or No

If yes, you may need to apply for Hazardous Substances Consent

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.

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 R.W. Cox (Applicant / Agent) Date 4.4.01

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 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 R.W. Cox (Applicant / Agent) Date 4.4.01

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 .....