FOUR COPIES REQUIRED

# PLANNING APPLICATION

**For office use only**

Application No. H0851/01/01

Date registered 05 JUN 2001

Please use block letters

**NAME AND ADDRESS OF APPLICANT**

MR + MRS. S.J. TAYLOR.
WARGATE WAY FARMHOUSE.
WARGATE WAY.
GOSBERTON.
SPALDING. LINS. PE11 4HE
Tel No. 01775. 840411

**NAME AND ADDRESS OF AGENT**

(if now completed by agent)
R.N. COWLING. MBIAT.
ARCHITECTURAL TECHNOLOGIST
9. GRAHAM CLOSE
SPALDING. LINS. PE11 3FL
Tel No. 01775. 723836
Personal contact name: AS ABOVE

Please use block letters

**FULL POSTAL ADDRESS OF THE APPLICATION SITE**

WARGATE WAY FARMHOUSE. WARGATE WAY. GOSBERTON

Please use block letters

**DESCRIPTION OF PROPOSED DEVELOPMENT**

PROPOSED EXTENSION TO FARMHOUSE

RECEIVED
05 JUN 2001

Please ... four copies of all plans ... ownership certificate (see back page)

£95-00

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

Previous application No.

Signed R.N. Cowling Date 5th June 2001.

Please tick **one** box and answer the extra questions ... as appropriate

2. **TYPE OF APPLICATION**

(✓)

... **full** application for change ... existing access ✓ → Now complete Parts 3, 4 and 5 and an Ownership Certificates

or ... **outline** application

... any conditions you are requesting ... you wish to be considered as part of ... application

Design ... Appearance

Means of Access ... Landscaping

Now complete Parts 3 and 5 and an Ownership Certificate

or ... **reserved matters** application

... please state Reference Number of outline permission ... reserved matters are submitted ...

Now complete Part 4 only

or ... application for **renewal** of temporary permission ... **continuation** without complying with a condition ...

... please state Reference Number of previous permission ... Condition Number relevant to ...

Now complete an Ownership Certificate

or ... application for **modification** ... has not yet been implemented

... please state Reference Number of previous permission ... Condition Number relevant to ...

Now complete an Ownership Certificate

## TYPE OF DEVELOPMENT

3. A. Please state whether this 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) | 0.161 | hectares ± |
| B. If building works are proposed, please state extra floor space to be created | 40.50 | sq. metres |
| C. Please state size of any new structure:- (a) max. height: | 7.60 | metres |
| (b) max. length: | 4.50 | metres |
| (c) max. width: | 4.50 | metres |
| D. Please state type and colour of materials for facing external walls: | FACING BRICK TO MATCH EXISTING TEXTURE + COLOUR. | |
| E. Please state type and colour of roofing materials. | ROOF TILE TO MATCH EXISTING | |
| 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.

**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

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

NOT APPLICABLE

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 involves the removal of hedgerow | 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 one box and complete B if necessary

A ... does not involve any alteration of existing floorspace ☐

B ... involves the creation of 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 ..... (Applicant / Agent) Date 5.6.2001

**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 ..... (Applicant / Agent) Date 5.6.2001

**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 .....