FOUR COPIES REQUIRED

PLANNING APPLICATION

For office use only

Application No. H11/0580/01

Date Received 15 MAY 2001

Please write in letters

NAME AND ADDRESS OF APPLICANT

MR J. MARCHETTI
10. LANCASTER DRIVE.
LONG SUTTON.
SPALDING. LINCS

Tel No.

NAME AND ADDRESS OF AGENT
(if appointed by agent)

DAVID BROKER DESIGN SERVICES
DUNBROOKE HOUSE,
STATION RD.
WISBECH ST MARY
Tel No. 01945 410421
Fax No. (and contact name) DAVID BROKER.

Please write in BLOCK LETTERS

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS ABOVE.

Please continue on a separate sheet if necessary

DESCRIPTION OF PROPOSED DEVELOPMENT

Proposed extension to dwelling

Please complete all the questions in Parts 1 and 2 and submit all plans
and the appropriate certificate (see back page)

95-00

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

Signed D Broker Date 14-5-01

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 development of land ✓ → Now complete Parts 3, 4 and 5 and an Ownership Certificates

or This is an **outline** application

Please state the Application Number of the outline permission to be considered as part of this application

Please tick any box below where you are including details of the following matters for approval with this application

Design ☐ Means of Access ☐ Landscaping ☐

Siting ☐ External Appearance ☐

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** of use not complying with a condition ☐

Please state reference Number of previous permission

Please state Condition Number referred to

Now complete Part 5 and Ownership Certificate

or This is an application for **modification** of a condition ☐

attached to a permission that has not yet been implemented

Please state reference Number of previous permission

Please state Condition Number referred to

Please state why modification is required

Now complete Part 5 and Ownership Certificate

TYPE OF DEVELOPMENT

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

(i) New Dwelling		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)		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:	7.500	metres
(b) max. length:	8.760	metres
(c) max. width:	13.600	metres
D. Please state type and colour of materials for facing external walls:	To match existing	
E. Please state type and colour of roofing materials.	To match existing	
F. Has a survey of the site been undertaken? State Yes or No	No	

5. GENERAL INFORMATION Please complete each section

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

Dwelling - garden

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?

SEE BLOCK 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	Soakaway
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 for commercial farm 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.	☐	➡ Date: Consultee(s)
Is this application related to a previous submission?	☐	➡ 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 box and complete B if necessary

Proposal does not involve any alteration in existing floorspace ☐

Proposal involves the creation of or an alteration in total **gross** floorspace ☐ ➧

Total gross floor space sq. m. Previous total gross floor space sq. m.

Net additional gross floor space sq. m.

Industrial sq. m. Warehousing sq. m.

Please state use class

	Office Staff	Industrial staff	Other staff
How many staff (full-time equivalent) will be employed in connection with the development proposed? Please indicate the maximum number of the staff.			
Where will staff transferring from other premises please indicate numbers involved and the premises			
Please provide a brief description of the nature of the proposed products, processes, to be handled			
Is the site subject to any of the following? Please give details about the alternative development			
Is it near existing uses? Or near the site? Please describe	State Yes or No ☐		
Are there existing premises in the area which are inadequate or unsuitable? Please describe inadequate or unsuitable	State Yes or No ☐		
Please state existing gross floor area of such premises and amounts to be retained, if any of these			
Please state the parking, loading, unloading and turning arrangements of the site. Please show on the plans the number and dimensions of parking and loading bays and			
Please state the hours of operation of the site. Please indicate all vehicles which will be employed in connection with the development proposed			
Please state the nature and proposed means of disposal of trade effluent			
Will the proposal involve the use of any hazardous substances?	State Yes or No ☐ If yes, you may need to apply for Hazardous Substances Consent		
Please state the number of employees			

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 14.5.01

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 ..... (~~Applicant~~ / Agent) Date 14.5.01

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 .....