PLANNING APPLICATION

For office use only

H11/0791/01.

- 7 SEP 2001

NAME AND ADDRESS OF APPLICANT

TYRRELL PROPERTIES
SILVERWOOD NURSERY
BURNS GATE
HENLEY, SUTTON
STAMFORD
LINCS

NAME AND ADDRESS OF AGENT

COOPER ARCHITECTURAL DESIGN
UNIT A. 12A PARK ROAD
HOLBEACH
SPALDING, LINCS

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS APPLICANT

DESCRIPTION OF PROPOSED DEVELOPMENT

TOILET BLOCK / STORE

OFFIC

95.00

29-08-01

Signed

Date

Please one box only

TYPE OF APPLICATION

Now complete Parts 3, 4 and 5 and 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) Change of use		
(iii) Alterations or extension	✓	
(iv) Change of use		

4. A. Please state site area (in all cases)	15.56	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:	2.8.	metres
(b) max. length:	6.29	metres
(c) max. width:	2.475	metres
D. Please state type and colour of materials for facing external walls:	BRICK TO MATCH EXISTING	
E. Please state type and colour of roofing materials.	FLAT ROOF	
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 use or vacant, the last use(s) of site.

NURSERY (PLANT)

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, UNCHANGED.

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

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 /

C. Please state whether a watercourse will be affected NO

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

PLEASE COMPLETE IN ALL CASES

	State Yes or No	
The proposal involves a material change of use of agriculture	YES	➡ 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 who you propose to send a copy of the application to the consultee yourself or will 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. THE TOILET BLOCK IS REQUIRED FOR USE BY SEASONAL WORKERS ON THE NURSERY & THE STORE IS FOR THE SA

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** ☐ ⬇

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	

FURE STORAGE & LABELS ETC.

OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THREE SECTIONS.

1. **APPLICANT'S INTEREST**
Please state interest in site (e.g. owner, prosp. purchaser)
(Please remember to notify ... if applicant is not the owner of 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** (ie. 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 29-08-00

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 29-08-00

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 .....