FOUR COPIES REQUIRED

PLANNING APPLICATION

For office use only

Application No. H13/0420/01

Date Registered 1-5 APR 2001

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

21 ASHBY GARDENS
(MR & MRS C. EDWARDS)
MOULTON, SPALDING
LINCS PE12 6QR.

Tel No. 01406 370831

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

N/A

Tel No.
(including contact name)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

21 ASHBY GARDENS, MOULTON, SPALDING, LINCS
PE12 6QR.

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

ALTERATION TO GARAGE/UTILITY ON GROUND FLOOR AND EXTENSION TO FIRST FLOOR FOR BEDROOM & SHOWER ROOM

Please complete

Signed J Edwards

Date 3/4/01

Please list number of all plans
and Ownership certificate (see back page)

Fee £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 under that category

2 **TYPE OF APPLICATION**

(✓)

This is a **full** application for change of use and/or new building works ✓ ➡ Now complete Parts 3, 4 and 5 and an Ownership Certificates

or This is an **outline** application

Please state Site Area (Hectares)

Please tick any box where you are including details which you wish to be considered as part of the application

Design External 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 the 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** of a condition where permission has recently been granted

Please state reference Number of previous permission

Please state condition Number referred to

Please state condition 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)	0.60 hectares
B. If building works are proposed, please state extra floor space to be created:	21 sq. metres
C. Please state size of any new structure:- (a) max. height:	6.30 metres
(b) max. length:	9.60 metres
(c) max. width:	2.70 metres
D. Please state type and colour of materials for facing external walls:	RED FACING BRICK TO MATCH EXTG
E. Please state type and colour of roofing materials.	GREY CONC TILE TO MATCH EXTG
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.

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 GARAGE

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 & EXTG RWP

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.	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.

INDUSTRIAL, WAREHOUSING, OFFICES OR SHOPS Please complete if appropriate

Please tick one box and complete B if necessary

A. This does not involve any alteration in existing floorspace ☐

B. This involves the creation of or an alteration in total **gross** ☐ ⬇

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

Net additional floorspace sq. m. Industrial sq. m. Warehousing sq. m.

Please state use

	Office Staff	Industrial staff	Other staff
How many office and other staff will be employed in connection with the development proposed? How many of the employees are likely to be resident on the site?			
Will any staff be transferred from other premises to the new business? If so, where from?			
If the development is for retail purposes, what is the estimated amount of the net sales floorspace which is likely to be devoted to the sale of comparison goods?			
If the development is for a larger scale food retail store, what is the estimated amount of the net sales floorspace which is likely to be devoted to the sale of convenience goods?			
Will the proposal involve the loss of existing use on or over the site?	State Yes or No ☐		
If so, please specify			
Will the proposal involve the loss of existing premises in this use which are considered to be obsolete, inadequate or unsuitable?	State Yes or No ☐		
If so, please state the gross floor area of each unit and the period in respect of those			
Please state the number of spaces for the parking, loading and unloading of vehicles within the curtilage of the site? Please state the provision on the plan for operational needs and			
Please state what rights of way to the site will be required for employees or others to walk			
Please state the proposed means of disposal of trade refuse			
Will the proposal involve the use of storage of any hazardous substances?	State Yes or No ☐	If yes, you may need to apply for Hazardous Substances Consent	
Please state the means of access to premises			

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 J Edwards (Applicant / ~~Agent~~) Date 3/4/01

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 J Edwards (Applicant / ~~Agent~~) Date 3/4/01

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 .....