FOUR COPIES REQUIRED

PLANNING APPLICATION

For office use only

Application No. H14/0394/98

Date Registered 15 APR 1998

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

D.R. & M.J. HULL
KRESTON NURSERIES,
MILL GARDEN ROAD
PINCHBECK, SPALDING.

Tel. No.

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

A.C. HORNSBY
PEAK HILL
CONBIT, SPALDING

Tel. No. 01406 350 591
(Personal contact name)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS 1.

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

PROPOSED CHALET BUNGALOW AND GARAGE.

Please complete

I attach
* Four copies of all plans
* an ownership certificate (see back page)
* a fee of £190.00 (If you consider no fee is payable include a written explanation instead.)

Signed. [signature] Date 14.4.98

Previous application No.

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

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 this application.

Siting [ ] Design [ ] External Appearance [ ]

Means of Access [ ] Landscaping [ ]

Now complete Parts 3 and 5 and an Ownership Certificate.

or This is a **reserved matters** application. [ ]

A. Please state Reference Number of outline permission.
B. Please state which reserved matters are dealt with in this application.
Now complete Part 4 only

or This is an application for **renewal** of temporary permission or **continuation** without complying with planning condition [ ]

A. Please state reference Number of previous permission
B. Please state Condition Number referred to
Now complete an Ownership Certificate

or This is an application for **modification** of a condition on a planning permission which has not yet been implemented. [ ]

A. Please state Reference Number of pervious permission
B. Please state Condition Number referred to
C. Please state variation required
Now complete an Ownership Certificate.

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 14.4.98

Certificate B The applicant has given the required notice to everyone else who was 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 14.4.98

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 .....

TYPE OF DEVELOPMENT

3. A. Please state whether the proposal involves:

(i) New Dwellings	✓
(ii) Other new building(s)	
(iii) Alterations or extension	
(iv) Change of use	

4. A. Please state site area (in all cases)

SEE PLAN hectares

B. If building works are proposed, please state existing floor space to be created:

– square metres

C. Please state size of any new structures: (a) height

SEE PLANS { metres
(b) width metres
(c) length metres

D. Please state type and colour of materials for facing walls

IBSTOCK GRAVELEASY AUTUMN FLAME FACING BRICKS. REPLANTS PLAIN TILES COLOUR TUDOR BROWN

E. Please state type and colour of roofing material

F. Has a survey of the site been undertaken? State year

YES

5. GENERAL INFORMATION Please complete as appropriate

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

GARDEN / NURSERY

ACCESS TO ROADS (VEHICULAR AND PEDESTRIAN)

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

WILL GREEN ROAD ✓

C. What provision will be made for garaging or parking within the site?

SEE PLAN

TREES Please tick one box

A. The proposal does not involve the felling of trees ✓

B. The proposal does involve the felling of trees

DRAINAGE Please complete

A. Please state how surface water will be disposed of

TO SOAKAWAYS

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

–

C. Please state whether a land drainage consent is required

NO

D. Foul sewerage will be disposed of to

Mains sewer ✓ Other (please specify)

PLEASE COMPLETE IN ALL CASES

The proposal is in connection with a dwelling	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 land	NO	
The proposal is for industrial, storage, warehousing, office, shopping or similar commercial purposes	NO	➔ If so, please complete Part 7
In cases where a statutory consultee has been involved, please state whether you have received a copy of the response to the consultee yourself. If not, please give details	–	➔
Is this application related to a previous application?	NO	➔

6. ANY OTHER INFORMATION Please use this space for any other information relating to your application.

Continue on separate sheet if necessary

SEE SUPPLIMENTARY DETAILS