FOUR COPIES REQUIRED

PLANNING APPLICATION

For office use only

Application No. H51271/98

Date Registered 23 DEC 1998

1. Please read the notes before completing this form. Please complete in black ink.

NAME AND ADDRESS OF APPLICANT

S&R BINGHAM,
CROSS ROADS NURSERIES
MAIN ROAD
QUADRING
SPALDING
LINCS

Tel No.

NAME AND ADDRESS OF AGENT

(if any) to whom correspondence should be sent.

COOPER ARCHITECTURAL DESIGN
HOCKLESGATE, FLEET
SPALDING, LINCS
Tel. 01406 423762

Person to contact if necessary

Please state clearly and precisely

FULL POSTAL ADDRESS OF THE APPLICATION SITE

113 MAIN ROAD, QUADRING, SPALDING LINCS

Please state clearly and precisely

DESCRIPTION OF PROPOSED DEVELOPMENT

PROPOSED VEHICULAR ACCESS

OFFICE COPY

Please read the notes before completing this section. Attach any necessary additional information.

Signature

Date 7-12-98

Please tick the appropriate box to answer the various questions under that part.

2. TYPE OF APPLICATION

This is an application for change of use and/or new building works

Any supporting information attached

or This is an outline application

Site area (Hectares)

Please state clearly any works 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 3 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 under which planning permission was granted but has not yet been implemented

a) Please state Reference Number of previous permission

b) Please state Condition Number referred to

c) Please state variation required

Now complete an Ownership Certificate.

TYPE OF DEVELOPMENT

3. A

✓

4. A

hectares

B. If building works

sq. metres

metres

metres

metres

D.

E.

F. State Yes or No YES

5. **GENERAL**

EXISTING USE

Please

DOMESTIC

ACCESS

A

to

MAIN ROAD

✓

✓

PROPOSED PARKING

✓

S

Please show details on plans

DRA

A

✓

B.

✓

NO

Septic tank

Please

Yes/No

NO ➡ If so, please give details in Part 6

NO

NO

NO ➡ If so, please complete Part 7

NO ➡

NO ➡

6. S

Please set out any other information in support of your application.

...SHOPS, OFFICES OR SHOPS Please complete if appropriate

...existing floorspace

...gross

sq. m

sq. m

...sq. m Warehousing sq. m

	Industrial staff	Other staff

Yes / No

Yes / No

Yes / No

If yes, you may need to apply for Hazardous Substances Consent

OWNERSHIP CERTIFICATES

PLEASE COMPLETE THE 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.

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 is one of 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 of which not less than 7 years or more remains unexpired. If you are unable to trace the owner, please contact the Planning Office for 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 7-12-98

Certificate B The applicant has given the required notice to everyone else who was 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.
Name(s) of owner(s):
Address at which notice was served: 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 an agricultural holding.

Signed ..... (Applicant / Agent) Date 7-12-98

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: Date Notice Served

Signed ..... (Applicant / Agent) Date .....