SOUTH HOLLAND DISTRICT COUNCIL

H16 - 0112 - 10

10 FEB 2010

Application for Planning Permission.
Town and Country Planning Act 1990

FILE COPY

Publication of applications on planning authority websites.
Please note that the information provided on this application form and in supporting documents may be published on the Authority's website.
If you require any further clarification, please contact the Authority's planning department.

1. Applicant Name, Address and Contact Details

Title: | First name: | Surname:

Company name: Lincolnshire NHS

Street address: Cross o Cliff Court

Town/City: Lincoln

County: Lincolnshire

Country:

Postcode: LN4 2HN

	Country Code	National Number	Extension Number
Telephone number:			
Mobile number:			
Fax number:			

Email address:

Are you an agent acting on behalf of the applicant? (•) Yes ( ) No

2. Agent Name, Address and Contact Details

Title: | First Name: Sam | Surname: Culling

Company name: Core + Architects Ltd

Street address: The Terrace, chestnut street

Town/City: lincoln

County: lincolnshire

Country: United Kingdom

Postcode: LN2 1BD

	Country Code	National Number	Extension Number
Telephone number:	01522	525901	
Mobile number:			
Fax number:			

Email address: sam.culling@core-architects.co.uk

3. Description of the Proposal

Please describe the proposed development including any change of use:

Demolition of single storey building, extension and refurbishment to create new primary care resource centre.

Has the building, work or change of use already started? ( ) Yes (•) No

4. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House: | Suffix:

House name: SPALDING HEALTH CLINIC

Street address: BEECHFIELD GARDENS

Town/City: SPALDING

County: LINCOLNSHIRE

Postcode: PE11 1UN

Description of location or a grid reference
(must be completed if postcode is not known):

Easting: 525120

Northing: 322709

5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? (•) Yes ( ) No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title: Mr First name: David Surname: gedney

Reference: 01

Date (DD/MM/YYYY): 09/11/2009 (Must be pre-application submission)

Details of the pre-application advice received:

Telephone discussions have taken place with David in November 2009

6. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway? (•) Yes ( ) No

Is a new or altered pedestrian access proposed to or from the public highway? (•) Yes ( ) No

Are there any new public roads to be provided within the site? ( ) Yes (•) No

Are there any new public rights of way to be provided within or adjacent to the site? ( ) Yes (•) No

Do the proposals require any diversions/extinguishments and/or creation of rights of way? ( ) Yes (•) No

If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan(s)/drawings(s)

C09.105.06 - Site Layout

7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste? (•) Yes ( ) No

If Yes, please provide details:

Internal and external waste storage

Have arrangements been made for the separate storage and collection of recyclable waste? (•) Yes ( ) No

If Yes, please provide details:

Internal and external waste storage

8. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ( ) Yes (•) No

9. Authority Employee/Member

With respect to the Authority, I am:

(a) a member of staff
(b) an elected member
(c) related to a member of staff
(d) related to an elected member

Do any of these statements apply to you? ( ) Yes (•) No

10. Materials

Please state what materials (including type, colour and name) are to be used externally (if applicable):

Walls - description:

Description of *existing* materials and finishes:

Buff brick to existing 2 storey building

Description of *proposed* materials and finishes:

Buff brick retained to existing building
Red brick, render and rain screen cladding to new build.
See drawings for location

Roof - description:

Description of *existing* materials and finishes:

brown concrete tiles

Description of *proposed* materials and finishes:

Retain tiles to existing
Single ply flat roof
Slate grey tiles to new extension

Windows - description:

Description of *existing* materials and finishes:

White PVC

Description of *proposed* materials and finishes:

White PVC retained to existing
Aluminium powder coated to the proposed

Doors - description:

Description of *existing* materials and finishes:

Timber

Description of *proposed* materials and finishes:

Aluminium powder coated

Boundary treatments - description:

Description of *existing* materials and finishes:

brick walls and fencing

Description of *proposed* materials and finishes:

Retain existing walls and fencing

Vehicle access and hard standing - description:

Description of *existing* materials and finishes:

Tarmac

Description of *proposed* materials and finishes:

tarmac

Lighting - add description

Description of *existing* materials and finishes:

Wall mounted lights

Description of *proposed* materials and finishes:

Building mounted lighting

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? (•) Yes ( ) No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

Design & Access Statement C09.105

11. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

Type of vehicle	Existing number of spaces	Total proposed (including spaces retained)	Difference in spaces
Cars	30	34	4
Light goods vehicles/public carrier vehicles	0	0	0
Motorcycles	0	0	0
Disability spaces	0	4	4
Cycle spaces	0	5	5
Other (e.g. Bus)	0	0	0
Short description of Other			

12. Foul Sewage

Please state how foul sewage is to be disposed of:

Mains sewer	☒	Package treatment plant	☐	Unknown	☐
Septic tank	☐	Cess pit	☐		

Other

Are you proposing to connect to the existing drainage system? (•) Yes ( ) No ( ) Unknown

If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):

C09.105.02

13. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.) ( ) Yes (•) No

If Yes, you will need to submit an appropriate flood risk assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? ( ) Yes (•) No

Will the proposal increase the flood risk elsewhere? ( ) Yes (•) No

How will surface water be disposed of?

☐ Sustainable drainage system	☒ Main sewer	☐ Pond/lake
☐ Soakaway	☐ Existing watercourse	

14. Biodiversity and Geological Conservation

To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals.

Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, OR on land adjacent to or near the application site:

a) Protected and priority species

( ) Yes, on the development site ( ) Yes, on land adjacent to or near the proposed development (•) No

b) Designated sites, important habitats or other biodiversity features

( ) Yes, on the development site ( ) Yes, on land adjacent to or near the proposed development (•) No

c) Features of geological conservation importance

( ) Yes, on the development site ( ) Yes, on land adjacent to or near the proposed development (•) No

15. Existing Use

Please describe the current use of the site:

East Lincolnshire primary care trust health clinic

Is the site currently vacant? ( ) Yes (•) No

Does the proposal involve any of the following:

Land which is known to be contaminated? ( ) Yes (•) No

Land where contamination is suspected for all or part of the site? ( ) Yes (•) No

A proposed use that would be particularly vulnerable to the presence of contamination? ( ) Yes (•) No

Application advice
If you have said Yes to any of the above, you will need to submit an appropriate contamination assessment.

16. Trees and Hedges

Are there trees or hedges on the proposed development site? (•) Yes ( ) No

And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? (•) Yes ( ) No

If Yes to either or both of the above, you will need to provide a full Tree Survey with accompanying plan before your application can be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'

17. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste? ( ) Yes (•) No

18. Residential Units

Does your proposal include the gain or loss of residential units? ○ Yes ◉ No

19. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace? ◉ Yes ○ No

Use class/type of use		Existing gross internal floorspace (square metres)	Gross internal floorspace to be lost by change of use or demolition (square metres)	Total gross new internal floorspace proposed (including changes of use) (square metres)	Net additional gross internal floorspace following development (square metres)
Other	Please Specify	931.0	371.0	433.0	62.0
	Total	931.0	371.0	433.0	62.0

For hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms:

Use Class	Types of use	*Existing rooms to be lost by change of use* or demolition	*Total rooms proposed (including* changes of use)	Net additional rooms

20. Employment

If known, please complete the following information regarding employees:

	Full-time	Part-time	Equivalent number of full-time
Existing employees	0	0	0
Proposed employees	0	0	0

21. *Hours of Opening*

If known, please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday Start Time	Monday to Friday End Time	Saturday Start Time	Saturday End Time	Sunday and Bank Holidays Start Time	Sunday and Bank Holidays End Time	Not Known
Other							☒

22. Site Area

What is the site area? 2,300 sq.metres

23. Industrial or Commercial Processes and Machinery

Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the *type of machinery which may be installed on site:*

None

Is the proposal for a waste management development? ○ Yes ◉ No

24. Hazardous Substances

Is any hazardous waste involved in the proposal? ○ Yes ◉ No

25. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? ◉ Yes ○ No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

◉ The agent ○ The applicant ○ Other person

26. Certificates (Certificate A)

Certificate of Ownership - Certificate A

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

Title: Mr First name: sam Surname: culling

Person role: Agent Declaration date: 02/02/2010 ☒ Declaration made

26. Certificates (Agricultural Holdings Certificate)

Agricultural Holding Certificate
Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You Must Select Either A or B

(A) None of the land to which the application relates is, or is part of an agricultural holding. (●)

(B) I have/The applicant has given the requisite notice to every person other than myself/the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below: ( )

Title: Mr First Name: sam Surname: culling

Person role: Agent Declaration date: 02/02/2010 ☒ Declaration Made

27. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. ☒

Date 02/02/2010