PLANNING APPLICATION

For office use only

Application No. H16/0267/99

Date Registered 17 MAR 1999

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

J. & A TYRRELL
LOWFIELDS NURSERIES
FULNEY DROVE
SPALDING
LINCS

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

COOPER ARCHITECTURAL DESIGN
HOCKLESGATE, FLEET
SPALDING, LINCS
01406 423762

Tel. No.
Personal callers to DPE

OFFICE COPY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS APPLICANT

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

CHANGE OF USE LIGHT INDUSTRIAL TO B.2.
(FULNEY SHOTBLASTING) (Retrospective)

Please enclose

I attach

Fee £ 190.00

Signed ..... Date 10.3.99

Please read this form and answer the extra questions under

2. TYPE OF APPLICATION

This is a **full** application for change of use and/or new building(s) ✓

or This is an **outline** application

Please state Site Area (Hectares)

Please tick any box where you are including details of the following matters 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 previous permission
B. Please state Condition Number referred to
C. Please state variation required
Now complete an Ownership Certificate.

TYPE OF DEVELOPMENT

3. A [illegible] (Tick one or more boxes)

		If so, how many:
	✓	

4. A [illegible]

B. If [illegible]

C. [illegible] a. Max. height
b. Max. length
c. Max. width

D. [illegible] e. Number of car spaces

E. [illegible]

F. Has [illegible] started? State Yes or No

	hectares
	sq. metres
	metres
	metres
	metres
YES	

5. GENERAL INFORMATION (Tick one box in each section)

EXISTING USE
Please state [illegible] of site: LIGHT INDUSTRIAL

ACCESS [illegible] (EXISTING) (Tick one box)

[illegible]	✓	
[illegible]		as: Private road / Public road (not motorway) / New estate road
[illegible]	EXISTING	

[illegible]

[illegible]	✓	
[illegible]		➡ If so, please show details on plans.

DRAINAGE

[illegible]

Septic tank

[illegible]	State Yes or No	
[illegible]	NO	➡ If so, please give details in Part 6
[illegible]	NO	
[illegible]	NO	
[illegible]	NO	
[illegible]	YES	➡ If so, please complete Part 7
[illegible]	NO	➡ Date: Class (specify):
[illegible]	NO	➡ Application No.

6. [illegible] any [illegible] you wish in support of your application.

INDUSTRIAL, WAREHOUSING, OFFICES OR SHOPS Please complete if appropriate

existing floorspace ✓

in total **gross**

sq. m.

Warehousing sq. m.

Office Staff	Industrial staff	Other staff
	2.	

SHOT BLASTING STEEL COMPONENTS

✓

State Yes or No

NC

State Yes or No

NC

EXISTING UNCHANGED

ONE WORKS VAN

State Yes or No

NC

If yes you may need to apply for Hazardous Substances Consent

EXISTING

OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THESE 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 the owner of only part of the site) 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 with not less than 7 years or more remains unexpired). If you are unable to trace the owner, please contact our 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 10-3-99

Certificate B The applicant has given the required notice to everyone else who 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.
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 an agricultural holding.

Signed ..... (~~Applicant~~ / Agent) Date 10-3-99

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 .....