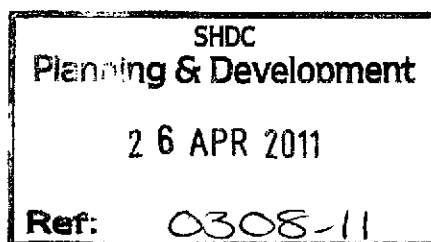


Mr David Roberts  
Head of Development Control  
South Holland District Council  
Council Offices  
Priory Road  
Spalding  
PE11 2XE

8<sup>th</sup> March 2011

Ref: LN-E-CR-073-000000-026



Centrica Renewable Energy Limited  
Millstream  
Maidenhead Road  
Windsor  
Berkshire SL4 5GD

Telephone +44 (0) 1753 431000  
Facsimile +44 (0) 1753 491387  
[www.centrica.com/renewables](http://www.centrica.com/renewables)

Dear David

**Lincs Offshore Wind Farm: Engineering Works to Secondary Sea Defence Associated with Construction of Approved Lincs Off Shore Wind Farm**

I write further to recent discussions with the Council regarding the ongoing construction of the Lincs Offshore Wind Farm.

Please find enclosed a planning application seeking consent under the Town and Country Planning Act 1990 to make temporary modifications to the Secondary Sea Defence north of Sutton Bridge in connection with the ongoing construction of the Lincs Offshore Wind Farm.

This application comprises the following material:

- 4 x Copies of this covering letter
- 4 x Application forms and certificates of ownership
- 4 x Site location plans
- 4 x Plans of the proposed works

It is understood that a design and access statement is not required for proposals of this type in accordance with circular 01/2006 and more recent amendments to that document.

This application is made following the approval of a previous, very similar, application, made last year (South Holland reference H18-0332-10). Planning permission was granted for that proposal, subject to conditions, on 3<sup>rd</sup> June 2010.

A very similar scope of work to that here proposed was permitted by the District Council in 2010, but due to complications with the construction, which the District Council is already aware of, the cable ducts were never pulled through the defence and the modifications that were made were subsequently reinstated.

As your Council will be aware a concurrent application for planning permission has been made in respect of the Primary Sea Defence. That application seeks consent for modifications to the Primary Defence to allow the installation of cables by chain trenching, as an alternative to Horizontal Directional Drilling (HDD), the method employed in 2010. However, in order to provide contingency to the project, Lincs Wind Farm Ltd (LWFL) would like to retain the option to resume Horizontal Directional Drilling (HDD) for the cable installation, at greater depth in order to try and mitigate the issues that were encountered last year. At present however it is not known with any certainty if deeper drilling would overcome those problems. The preferred option for the project therefore is still to install the cables by trenching and if the applications for that work are successful the development proposed in this application will not be required.

**Rationale for the Development**

The cable ducts remain assembled and are currently laid out within the consented onshore cable corridor area. Should the ducts be pulled offshore it would be necessary for sections of the ducts to

span the secondary sea defence as they were pulled onshore. If the duct were to span the defence at its current height that would place structural stress on the ducts, potentially affecting their integrity. In order to remove that stress it is proposed to temporarily remove a section of the Secondary Sea Defence to lower its height at the crossing point, thus reducing the stresses when elevating the ducts up and across the defence. All modifications will be temporary and the defence fully reinstated once work has ceased.

#### Construction Details

It is proposed that a 21t-35t excavator will be positioned on the bund in two nearby locations and will excavate and remove material from the bund for temporary storage on land near to the proposed cuts. The single cut would be up to 50m in width and each will be 2m in depth, measured from the current top of the defence to the base of the excavated area. The excavated topsoil will be stored separately and reinstated on the bund to ensure that seeds and vegetation can be re-established naturally.

The defence shall be reinstated immediately following the removal of the ducts using the same positioning for the excavator. Material would be deposited in layers to match the existing layers and compacted using a Bomag 120 or alike. Topsoil shall be spread evenly and graded to the contours of the bank. No surrounding vegetation will be adversely affected by these proposals. There would be no net landscape impact associated with the two excavations since all existing features will be reinstated in accordance with their existing characteristics and the proposal is therefore considered to preserve the character and appearance of the countryside in accordance with PPS7 and Policy SG4 of the South Holland Local Plan.

#### Permanent Installation of Cables beneath the Secondary Sea Defence

For the avoidance of doubt LWFL already has the necessary consents to install the cables underneath the secondary sea defence by HDD, under the original planning permission granted for the onshore work under section 90 of the Town and Country Planning Act 1990, and subsequent consent granted by the Kings Lynn Internal Drainage Board for the same operation as required by Drainage Board Byelaws. That aspect of the cable installation is unchanged by the current submissions. As you are aware the remainder of the onshore cable installation was carried out during 2010 and just the northernmost section remains to be installed.

I hope that the proposals meet with your satisfaction and that the details provided are sufficient to aid in the determination of this application. For information we have discussed these proposals in principle with the Environment Agency and provided details to the Internal Drainage Board, who it is understood maintain the adjacent drain.

I look forward to hearing from you once the application has been registered and consultees duly notified.

Yours sincerely  
For and on behalf of LWFL



**Simon Gamage**  
Consents and Environment Manager (Onshore)  
Lincs Windfarm Limited  
Email: [gamages@rpsgroup.com](mailto:gamages@rpsgroup.com)  
Tel: 07786748445



FILE COPY

26 APR 2011

## Application for Planning Permission. Town and Country Planning Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://www.planningportal.gov.uk/apply)

### 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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

### 1. Applicant Name and Address

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

### 2. Agent Name and Address

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

### 3. Description of the Proposal

Please describe the proposed development, including any change of use:

ENGINEERING WORKS REQUIRED TO TEMPORARILY LAY CABLES THROUGH EXISTING BUND DURING CONSTRUCTION

Has the building, work or change of use already started?

☐ Yes

☒ No

If Yes, please state the date when building, work or use were started (DD/MM/YYYY):

(date must be pre-application submission)

Has the building, work or change of use been completed?

☐ Yes

☒ No

If Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY):

(date must be pre-application submission)

#### 4. Site Address Details

Please provide the full postal address of the application site:

Unit:  House number:  House suffix:

House name:

Address 1:  LAND EAST OF RIVER NENE, SUTTON BRIDGE

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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

Easting:  549603 Northing:  326435

Description:

BUND / SEA DEFENCE

#### 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).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

MR DAVID ROBERTS

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

14/02/11

Details of pre-application advice received?

REPRESENTS AN ACT OF ENGINEERING AND FULL PLANNING PERMISSION REQUIRED. THIS APPLICATION FOLLOWS A VERY SIMILAR APPLICATION (H18-0332-10) APPROVED LAST YEAR.

#### 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)

#### 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:

Have arrangements been made for the separate storage and collection of recyclable waste? ☐ Yes ☒ No

If Yes, please provide details:

#### 8. 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

If Yes, please provide details of the name, relationship and role

## 9. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

|                                             | Existing<br>(where applicable) | Proposed                                      | Not<br>applicable                   | Don't<br>Know            |
|---------------------------------------------|--------------------------------|-----------------------------------------------|-------------------------------------|--------------------------|
| Walls                                       |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Roof                                        |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Windows                                     |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Doors                                       |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Boundary treatments<br>(e.g. fences, walls) |                                | BUND TO BE REPLACED AS EXISTING<br>AND RESEED | <input type="checkbox"/>            | <input type="checkbox"/> |
| Vehicle access and<br>hard-standing         |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Lighting                                    |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Others<br>(please specify)                  |                                |                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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:

See covering letter

## 10. Vehicle Parking

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

| Type of Vehicle                                  | Total<br>Existing | Total proposed (including<br>spaces retained) | Difference<br>in spaces |
|--------------------------------------------------|-------------------|-----------------------------------------------|-------------------------|
| Cars                                             | 0                 | 0                                             | 0                       |
| Light goods vehicles/<br>public carrier vehicles | 0                 | 0                                             | 0                       |
| Motorcycles                                      | 0                 | 0                                             | 0                       |
| Disability spaces                                | 0                 | 0                                             | 0                       |
| Cycle spaces                                     | 0                 | 0                                             | 0                       |
| Other (e.g. Bus)                                 | 0                 | 0                                             | 0                       |
| Other (e.g. Bus)                                 | 0                 | 0                                             | 0                       |

### 11. Foul Sewage

Please state how foul sewage is to be disposed of:

- ☐ Mains sewer ☐ Cess pit  
☐ Septic tank ☐ Other  
☐ Package treatment plant

Are you proposing to connect to the existing drainage system? ☐ Yes ☒ No

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

### 12. 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 a 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 ☐ Existing watercourse  
☐ Soakaway ☐ Pond/lake  
☐ Main sewer

### 13. 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

### 14. Existing Use

Please describe the current use of the site:

AGRICULTURAL / UNMAINTAINED SEA DEFENCE

Is the site currently vacant? ☐ Yes ☒ No

If Yes, please describe the last use of the site:

When did this use end (if known)?

DD/MM/YYYY

(date where known may be approximate)

Does the proposal involve any of the following?  
If yes, you will need to submit an appropriate contamination assessment with your application.

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

### 15. 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 may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. 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'.

### 16. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste? ☐ Yes ☒ No

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

## 17. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units? ☐ Yes ☒ No  
If Yes, please complete details of the changes in the tables below:

### Proposed Housing

| Market Housing           | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | a     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | b     |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | c     |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | d     |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | e     |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | f     |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | g     |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | h     |

| Social Rented            | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | i     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | j     |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | k     |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | l     |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | m     |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | n     |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | o     |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | p     |

| Intermediate             | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | q     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | r     |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | s     |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | t     |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | u     |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | v     |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | w     |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | x     |

| Key worker               | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | y     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | z     |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | aa    |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | ab    |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | ac    |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | ad    |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | ae    |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | af    |

Total proposed residential units (A+B+C+D) =

### Existing Housing

| Market Housing           | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | 1     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | 2     |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | 3     |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | 4     |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | 5     |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | 6     |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | 7     |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | 8     |

| Social Rented            | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | 9     |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | 10    |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | 11    |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | 12    |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | 13    |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | 14    |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | 15    |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | 16    |

| Intermediate             | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | 17    |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | 18    |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | 19    |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | 20    |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | 21    |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | 22    |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | 23    |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | 24    |

| Key worker               | Not known                | Number of Bedrooms |   |   |    |         | Total |
|--------------------------|--------------------------|--------------------|---|---|----|---------|-------|
|                          |                          | 1                  | 2 | 3 | 4+ | Unknown |       |
| Houses                   | <input type="checkbox"/> |                    |   |   |    |         | 25    |
| Flats and maisonettes    | <input type="checkbox"/> |                    |   |   |    |         | 26    |
| Live-work units          | <input type="checkbox"/> |                    |   |   |    |         | 27    |
| Cluster flats            | <input type="checkbox"/> |                    |   |   |    |         | 28    |
| Sheltered housing        | <input type="checkbox"/> |                    |   |   |    |         | 29    |
| Bedsit/studios           | <input type="checkbox"/> |                    |   |   |    |         | 30    |
| Unknown type             | <input type="checkbox"/> |                    |   |   |    |         | 31    |
| Totals (a+b+c+d+e+f+g) = |                          |                    |   |   |    |         | 32    |

Total existing residential units (E+F+G+H) =

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

**18. All Types of Development: Non-residential Floorspace**

Does your proposal involve the loss, gain or change of use of non-residential floorspace?

☐ Yes☒ No

If you have answered Yes to the question above please add details in the following table:

| Use class/type of use               | Not applicable           | Existing gross internal floorspace (square metres) | Gross internal floorspace to be lost by change of use or demolition (square metres) | Total gross internal floorspace proposed (including change of use)(square metres) | Net additional gross internal floorspace following development (square metres) |
|-------------------------------------|--------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--------------------------------------------------------------------------------|
| A1                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Shops                               | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Net tradable area:                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A2                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Financial and professional services | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A3                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Restaurants and cafes               | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A4                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Drinking establishments             | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A5                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Hot food takeaways                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B1 (a)                              | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Office (other than A2)              | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B1 (b)                              | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Research and development            | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B1 (c)                              | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Light industrial                    | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B2                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| General industrial                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B8                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Storage or distribution             | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| C1                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Hotels and halls of residence       | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| C2                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Residential institutions            | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| D1                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Non-residential institutions        | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| D2                                  | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Assembly and leisure                | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| OTHER                               | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Please Specify                      | <input type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Total                               |                          |                                                    |                                                                                     |                                                                                   |                                                                                |

In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

| Use class      | Type of use              | Not applicable           | Existing rooms to be lost by change of use or demolition | Total rooms proposed (including changes of use) | Net additional rooms |
|----------------|--------------------------|--------------------------|----------------------------------------------------------|-------------------------------------------------|----------------------|
| C1             | Hotels                   | <input type="checkbox"/> |                                                          |                                                 |                      |
| C2             | Residential Institutions | <input type="checkbox"/> |                                                          |                                                 |                      |
| OTHER          |                          | <input type="checkbox"/> |                                                          |                                                 |                      |
| Please Specify |                          | <input type="checkbox"/> |                                                          |                                                 |                      |

**19. Employment**

Please complete the following information regarding employees:

|                    | Full-time | Part-time | Total full-time equivalent |
|--------------------|-----------|-----------|----------------------------|
| Existing employees | 0         | 0         | 0                          |
| Proposed employees | 0         | 0         | 0                          |

**20. Hours of Opening**

Please state the hours of opening for each non-residential use proposed:

| Use | Monday to Friday | Saturday | Sunday and Bank Holidays | Not known |
|-----|------------------|----------|--------------------------|-----------|
| N/A | N/A              | N/A      | N/A                      | N/A       |
|     |                  |          |                          |           |
|     |                  |          |                          |           |

**21. Site Area**

Please state the site area in hectares (ha) 1.2(Ha)

## 22. 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:

Is the proposal a waste management development? ☐ Yes ☒ No

If the answer is Yes, please complete the following table:

|                                                                    | Not applicable           | The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste) | Maximum annual operational throughput in tonnes (or litres if liquid waste) |
|--------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|
| Inert landfill                                                     | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Non-hazardous landfill                                             | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Hazardous landfill                                                 | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Energy from waste incineration                                     | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Other incineration                                                 | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Landfill gas generation plant                                      | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Pyrolysis/gasification                                             | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Metal recycling site                                               | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Transfer stations                                                  | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Material recovery/recycling facilities (MRFs)                      | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Household civic amenity sites                                      | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Open windrow composting                                            | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| In-vessel composting                                               | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Anaerobic digestion                                                | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Any combined mechanical, biological and/or thermal treatment (MBT) | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Sewage treatment works                                             | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Other treatment                                                    | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Recycling facilities construction, demolition and excavation waste | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Storage of waste                                                   | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Other waste management                                             | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |
| Other developments                                                 | <input type="checkbox"/> |                                                                                                                                                                                                |                                                                             |

Please provide the maximum annual operational throughput of the following waste streams:

|                                         |  |
|-----------------------------------------|--|
| Municipal                               |  |
| Construction, demolition and excavation |  |
| Commercial and industrial               |  |
| Hazardous                               |  |

If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.

## 23. Hazardous Substances

Does the proposal involve the use or storage of any of the following materials in the quantities stated below? ☐ Yes ☒ No ☐ Not applicable

If Yes, please provide the amount of each substance that is involved:

|                        |                      |                               |                      |                              |                      |
|------------------------|----------------------|-------------------------------|----------------------|------------------------------|----------------------|
| Acrylonitrile (tonnes) | <input type="text"/> | Ethylene oxide (tonnes)       | <input type="text"/> | Phosgene (tonnes)            | <input type="text"/> |
| Ammonia (tonnes)       | <input type="text"/> | Hydrogen cyanide (tonnes)     | <input type="text"/> | Sulphur dioxide (tonnes)     | <input type="text"/> |
| Bromine (tonnes)       | <input type="text"/> | Liquid oxygen (tonnes)        | <input type="text"/> | Flour (tonnes)               | <input type="text"/> |
| Chlorine (tonnes)      | <input type="text"/> | Liquid petroleum gas (tonnes) | <input type="text"/> | Refined white sugar (tonnes) | <input type="text"/> |

Other:

Other:

Amount (tonnes):

Amount (tonnes):

## 24. Ownership Certificates

One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form

### CERTIFICATE OF OWNERSHIP - CERTIFICATE A

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12**  
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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

### CERTIFICATE OF OWNERSHIP - CERTIFICATE B

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12**  
I certify/ The applicant certifies that I have/ the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, 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 this application relates.

| Name of Owner                                  | Address                                                                                              | Date Notice Served |
|------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------|
| THE CROWN ESTATE                               | C/O AGENT: MR ANDREW WATKIN, CARTER JONAS, PROPERTY CONSULTANTS, 6-8 HILLS ROAD, CAMBRIDGE, CB2 1NH. | 8/3/11             |
| J&S PROCTOR<br>PROCTOR BROTHERS (WINGLAND) LTD | C/O AGENT: ELIZABETH ALLEN, BROWN & CO, ST GEORGES CHAMBER, 27 KING STREET, KINGS LYNN, PE30 1ET     | 8/3/11             |
|                                                |                                                                                                      |                    |
|                                                |                                                                                                      |                    |
|                                                |                                                                                                      |                    |

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

### CERTIFICATE OF OWNERSHIP - CERTIFICATE C

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12**

I certify/ The applicant certifies that:

- Neither Certificate A or B can be issued for this application
- All reasonable steps have been taken to find out the names and addresses of the other owners (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

The steps taken were:

| Name of Owner | Address | Date Notice Served |
|---------------|---------|--------------------|
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

## 24. Ownership Certificates (continued)

### CERTIFICATE OF OWNERSHIP - CERTIFICATE D

#### Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

I certify/ The applicant certifies that:

- Certificate A cannot be issued for this application
- All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, 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 to which this application relates, but I have/ the applicant has been unable to do so.

The steps taken were:

|  |
|--|
|  |
|--|

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

|  |
|--|
|  |
|--|

On the following date (which must not be earlier than 21 days before the date of the application):

|  |
|--|
|  |
|--|

Signed - Applicant:

|  |
|--|
|  |
|--|

Or signed - Agent:

|  |
|--|
|  |
|--|

Date (DD/MM/YYYY):

|  |
|--|
|  |
|--|

## 25. Agricultural Land Declaration

### AGRICULTURAL LAND DECLARATION

#### Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

Agricultural Land Declaration - You Must Complete Either A or B

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

Signed - Applicant:

|  |
|--|
|  |
|--|

Or signed - Agent:

|  |
|--|
|  |
|--|

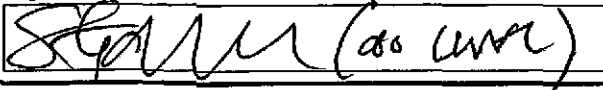
Date (DD/MM/YYYY):

|  |
|--|
|  |
|--|

(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:

| Name of Tenant                                 | Address                                                                                           | Date Notice Served |
|------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------|
| J&S PROCTOR<br>PROCTOR BROTHERS (WINGLAND) LTD | C/O: AGENT: ELIZABETH ALLEN, BROWN & CO, ST GEORGES CHAMBER, 27 KING STREET, KINGS LYNN, PE30 1ET | 8/3/14             |
|                                                |                                                                                                   |                    |
|                                                |                                                                                                   |                    |
|                                                |                                                                                                   |                    |
|                                                |                                                                                                   |                    |

Signed - Applicant:

|                                                                                    |
|------------------------------------------------------------------------------------|
|  |
|------------------------------------------------------------------------------------|

Or signed - Agent:

|  |
|--|
|  |
|--|

Date (DD/MM/YYYY):

|        |
|--------|
| 8-3-14 |
|--------|

## 26. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

The original and 3 copies of a completed and dated application form:



The correct fee:



The original and 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:



The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details):



The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:



The original and 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):



The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):



## 27. Déclaration

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

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

*Emma Woods*

8/3/4

(date cannot be pre-application)

## 28. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:  
[ ] EMMA [ ]

Country code: Mobile number (optional):  
[ ] 0778957978

Country code: Fax number (optional):  
[ ] [ ]

Email address (optional):

EMMA.WOODS@CENTRICA.COM

## 29. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:  
[ ] [ ] [ ]

Country code: Mobile number (optional):  
[ ] [ ]

Country code: Fax number (optional):  
[ ] [ ]

Email address (optional):

[ ]

## 30. 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)

☒ Agent

☐ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

[ ]

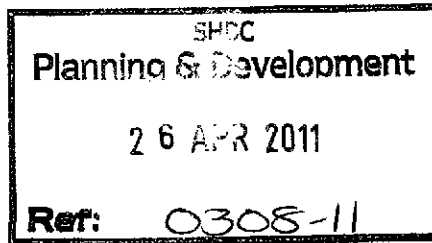
Telephone number:

[ ]

Email address:

[ ]

J and S Proctor  
c/o Elizabeth Allen  
Brown and Co  
St Georges Chamber  
27 King Street  
Kings Lynn  
PE30 1ET



Centrica Renewable Energy Limited  
Millstream  
Maidenhead Road  
Windsor  
Berkshire SL4 5GD

Telephone +44 (0) 1753 431000  
Facsimile +44 (0) 1753 491387  
[www.centrica.com/renewables](http://www.centrica.com/renewables)

8<sup>th</sup> March 2011

Ref: LN-D-CE-073-0000-000000-036

Dear Madam

**Lincs Offshore Wind Farm: Engineering Works to Secondary Sea Defence Associated with Construction of Approved Lincs Off-Shore Wind Farm**

Lincs Wind Farm Ltd has applied for planning permission to modify part of the secondary sea defence, north of Sutton Bridge. I enclose for your information plans of the proposed works and their location.

As your clients have an interest in land that is affected by the project, I am serving notice on you of the submission of this application, as required by the Town and Country Planning (General Development Management Procedure) Order 2010. Should you wish to make representations on this proposal please write to:

Planning Services  
South Holland District Council  
Council Offices  
Priory Road  
SPALDING  
Lincolnshire  
PE11 2XE

Should you have any direct questions regarding the proposal please do not hesitate to contact me directly.

Yours sincerely  
For Lincs Wind Farm Limited

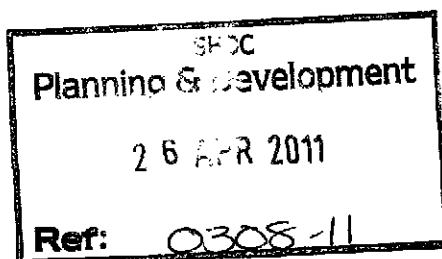
A handwritten signature in black ink, appearing to read 'S. Gamage'.

**Simon Gamage**  
Consents and Environment Manager (Onshore)  
Lincs Offshore Wind Farm  
Email: [gamages@rpsgroup.com](mailto:gamages@rpsgroup.com)  
Tel: 07786748445

The Crown Estate  
c/o Mr Andrew Watkins  
Carter Jonas  
6-8 Hills Road  
Cambridge  
CB2 1NH

8<sup>th</sup> March 2011

Ref: LN-D-CE-073-0000-000000-030



Centrica Renewable Energy Limited  
Millstream  
Maidenhead Road  
Windsor  
Berkshire SL4 5GD

Telephone +44 (0) 1753 431000  
Facsimile +44 (0) 1753 491387  
[www.centrica.com/renewables](http://www.centrica.com/renewables)

Dear Sir

**Lincs Offshore Wind Farm: Engineering Works to Secondary Sea Defence Associated with Construction of Approved Lincs Off-Shore Wind Farm**

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Priory Road  
SPALDING  
Lincolnshire  
PE11 2XE

Should you have any direct questions regarding the proposal please do not hesitate to contact me directly.

Yours sincerely  
For Lincs Wind Farm Limited

A handwritten signature in black ink, appearing to read 'S. Gamage'.

**Simon Gamage**  
Consents and Environment Manager (Onshore)  
Lincs Offshore Wind Farm  
Email: [gamages@rpsgroup.com](mailto:gamages@rpsgroup.com)  
Tel: 07786748445