

29 JUN 2009



H20/0472/09

Application for Outline Planning Permission with all matters reserved
Town and Country Planning Act 1990

FILE COPY

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership the information provided on this application form and in supporting documents may be published on the council's website

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website please contact the council'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	MR	First name	NATHAN	
Last name	GROOM			
Company (optional)				
Unit		House number	13	House suffix
House name				
Address 1	FESTIVAL SQUARE			
Address 2	SUTTON ST. JAMES			
Address 3				
Town	SPALDING			
County	Lincs			
Country				
Postcode	PE12 0EQ			

2. Agent Name and Address

Title	MR	First name	MARK	
Last name	PRIOR			
Company (optional)	ACCUBUILD LTD			
Unit		House number	47	House suffix
House name	THE LEWES			
Address 1	SALTS RD			
Address 2	WEST WALTON			
Address 3				
Town	WISBECH			
County	CAMBS.			
Country				
Postcode	PE14 7ET			

3. Description of the Proposal

Please describe the proposal

CONSTRUCTION OF A SINGLE STOREY THREE BEDROOM DWELLING

3. Description of the Proposal (continued)

Has building or works already been carried out?

☐ Yes ☒ No

If Yes please state the date when building or works were started (DD/MM/YYYY)

(date must be pre application submission)

Have the works been completed?

☐ Yes ☒ No

If Yes please state when the works were 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

Address 2

Address 3

Town

County

Postcode (optional)

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

Easting Northing

Description

5. 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 ☒ Unknown

How will surface water be disposed of?

☐ Sustainable drainage system ☐ Existing watercourse

☒ Soakaway ☐ Pond/lake

☐ Main sewer ☐ Unknown

6. 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

Reference

Date (DD/MM/YYYY) (must be pre application submission)

Details of pre application advice received?

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☒ No

If Yes please provide details

8. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council? ☐ Yes ☒ No

If Yes please provide details

9. Site Area

Please state the site area in hectares (ha)

10. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units?
If Yes, please complete details of the changes in the tables below

☒ Yes

☐ No

Proposed Housing

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

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

Total proposed residential units (A+B+C+D)= 1

Existing Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							0

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	☐						
Flats and maisonettes	☐						
Live work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals (a+b+c+d+e+f+g)=							

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

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total Existing Housing Grand Total): 1

11. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss gain or change of use of non residential floorspace? ☐ Yes ☒ No ☐ Unknown

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)	Unknown	Total gross internal floorspace proposed (including change of use)(square metres)	Unknown	Net additional gross internal floorspace following development (square metres)
A1	☐			☐		☐	
Shops	☐			☐		☐	
Net tradable area	☐			☐		☐	
A2	☐			☐		☐	
Financial and professional services	☐			☐		☐	
A3	☐			☐		☐	
Restaurants and cafes	☐			☐		☐	
A4	☐			☐		☐	
Drinking establishments	☐			☐		☐	
A5	☐			☐		☐	
Hot food takeaways	☐			☐		☐	
B1 (a)	☐			☐		☐	
Office (other than A2)	☐			☐		☐	
B1 (b)	☐			☐		☐	
Research and development	☐			☐		☐	
B1 (c)	☐			☐		☐	
Light industrial	☐			☐		☐	
B2	☐			☐		☐	
General industrial	☐			☐		☐	
B8	☐			☐		☐	
Storage or distribution	☐			☐		☐	
C1	☐			☐		☐	
Hotels and halls of residence	☐			☐		☐	
C2	☐			☐		☐	
Residential institutions	☐			☐		☐	
D1	☐			☐		☐	
Non residential institutions	☐			☐		☐	
D2	☐			☐		☐	
Assembly and leisure	☐			☐		☐	
OTHER	☐			☐		☐	
Please specify	☐			☐		☐	
	☐			☐		☐	
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	Unknown	Total rooms proposed (including changes of use)	Unknown	Net additional rooms
C1	Hotels	☐		☐		☐	
C2	Residential Institutions	☐		☐		☐	
Other	Hostels	☐		☐		☐	

12. Employment

Please complete the following information regarding employees

	Full time	Part time	Total full time equivalent	Not known
Existing employees				
Proposed employees				

13. 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

14. 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 ☐ Unknown

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)	Unknown	Maximum annual operational throughput in tonnes (or litres if liquid waste)	Unknown
Inert landfill	☐		☐		☐
Non hazardous landfill	☐		☐		☐
Hazardous landfill	☐		☐		☐
Energy from waste incineration	☐		☐		☐
Other incineration	☐		☐		☐
Landfill gas generation plant	☐		☐		☐
Pyrolysis/gasification	☐		☐		☐
Metal recycling site	☐		☐		☐
Transfer stations	☐		☐		☐
Material recovery/recycling facilities (MRFs)	☐		☐		☐
Household civic amenity sites	☐		☐		☐
Open windrow composting	☐		☐		☐
In vessel composting	☐		☐		☐
Anaerobic digestion	☐		☐		☐
Any combined mechanical biological and/or thermal treatment (MBT)	☐		☐		☐
Sewage treatment works	☐		☐		☐
Other treatment	☐		☐		☐
Recycling facilities construction demolition and excavation waste	☐		☐		☐
Storage of waste	☐		☐		☐
Other waste management	☐		☐		☐
Other developments	☐		☐		☐

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.

15. Existing Use

Please describe the current use of the site

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 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

If you have answered Yes to any of the above you will need to submit an appropriate contamination assessment

GARDEN/AMENITY LAND ANNEXED TO COMMERCIAL BUILDING

16. 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 (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

Signed Applicant

Or signed Agent

Date (DD/MM/YYYY)

CERTIFICATE OF OWNERSHIP CERTIFICATE B

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

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
WILLIAM GROOM	13 FESTIVAL SQUARE, SUTTON ST JAMES, SPALDING, Lincs PE12 0EQ	26/6/09
ADAM GROOM	68 JARVIS GATE, SUTTON ST JAMES SPALDING Lincs. PE12 0EP	26/6/09

Signed Applicant

Or signed Agent

Date (DD/MM/YYYY)

CERTIFICATE OF OWNERSHIP CERTIFICATE C

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

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)

16. Certificates (continued)**CERTIFICATE OF OWNERSHIP CERTIFICATE D****Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

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)

--

--

--

AGRICULTURAL HOLDINGS CERTIFICATE**Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

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)

N. Groom

--

26/06/2009

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

Signed Applicant

Or signed Agent

Date (DD/MM/YYYY)

--

--

--

17. 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.

A completed and dated application form with 3 copies



The correct fee



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



3 copies of a design and access statement



3 copies of the completed dated Article 7 Certificate (Agricultural Holdings)



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



3 copies of the completed dated Ownership Certificate (A B C or D as applicable)

**18. Declaration**

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)

N. Groom

--

26/06/09

(date cannot be pre-application)

19. Applicant Contact Details

Telephone numbers

Country code	National number	Extension number
	01945 440 678	

Country code	Mobile number (optional)
	0777 08 75779

Country code	Fax number (optional)

Email address (optional)

20. Agent Contact Details

Telephone numbers

Country code	National number	Extension number

Country code	Mobile number (optional)
	07866 705199

Country code	Fax number (optional)

Email address (optional)

Markusior@aol.com

21. 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