

OUR REF:

SHDC REF:

**PLANNING APPLICATION**

H21/0323/03

|                                                                                               |                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. NAME &amp; ADDRESS OF APPLICANT</b><br>MR & MRS WALLACE<br>84 STATION ROAD<br>TYDD GOTE | <b>NAME &amp; ADDRESS OF AGENT</b><br>PETER HUMPHREY ASSOCIATES<br>30 OLD MARKET<br>WISBECH<br>CAMBS<br>PE13 1NB<br><br>TEL NO. 01945 466966<br>FAX NO. 01945 466433 |
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13 MAR 2003

|                                                                                               |
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| <b>2. FULL POSTAL ADDRESS OF THE APPLICATION SITE</b><br>LAND ADJ. 84 STATION ROAD, TYDD GOTE |
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| <b>3. DESCRIPTION OF PROPOSED DEVELOPMENT</b><br>PROPOSED REPLACEMENT DWELLING |
|--------------------------------------------------------------------------------|

|                               |
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| <b>4. TYPE OF APPLICATION</b> |
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|                                                                  |  |
|------------------------------------------------------------------|--|
| A. FULL application for change of use and/ or new building works |  |
|------------------------------------------------------------------|--|

or

|                        |                                     |
|------------------------|-------------------------------------|
| B. OUTLINE application | <input checked="" type="checkbox"/> |
|------------------------|-------------------------------------|

|                        |       |          |
|------------------------|-------|----------|
| Please state Site Area | 0.987 | Hectares |
|------------------------|-------|----------|

|                                                                                                                 |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Please tick any box where you are including details which you wish to be committed as part of this application. |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------|--|--|--|--|

|        |        |                     |                 |                                                 |  |
|--------|--------|---------------------|-----------------|-------------------------------------------------|--|
| Siting | Design | External Appearance | Means of Access | <input checked="" type="checkbox"/> Landscaping |  |
|--------|--------|---------------------|-----------------|-------------------------------------------------|--|

or

|                                 |  |
|---------------------------------|--|
| C. RESERVED MATTERS application |  |
|---------------------------------|--|

|                                                       |  |
|-------------------------------------------------------|--|
| - Please state Reference Number of Outline permission |  |
|-------------------------------------------------------|--|

|                                                                           |  |
|---------------------------------------------------------------------------|--|
| - Please state which reserved matters are dealt with in this application. |  |
|---------------------------------------------------------------------------|--|

|        |        |                     |                 |             |  |
|--------|--------|---------------------|-----------------|-------------|--|
| Siting | Design | External Appearance | Means of Access | Landscaping |  |
|--------|--------|---------------------|-----------------|-------------|--|

or

|                                                    |  |
|----------------------------------------------------|--|
| D. RENEWAL of temporary permission or CONTINUATION |  |
|----------------------------------------------------|--|

|                                               |
|-----------------------------------------------|
| Without compliance with a planning condition. |
|-----------------------------------------------|

|                                                        |  |
|--------------------------------------------------------|--|
| - Please state Reference Number of previous permission |  |
|--------------------------------------------------------|--|

|                                               |  |
|-----------------------------------------------|--|
| - Please state Conditional Number referred to |  |
|-----------------------------------------------|--|

|                               |
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| <b>5. TYPE OF DEVELOPMENT</b> |
|-------------------------------|

|                                                     |                                     |
|-----------------------------------------------------|-------------------------------------|
| A. Please state whether the proposal involves:-     |                                     |
| i) New building(s)                                  | <input checked="" type="checkbox"/> |
| ii) Alterations or extensions to existing buildings | <input type="checkbox"/>            |
| iii) Change of use                                  | <input type="checkbox"/>            |
| iv) Demolition of buildings                         | <input checked="" type="checkbox"/> |

|                                                                |            |
|----------------------------------------------------------------|------------|
| B. If new dwellings are proposed, please state how many & type | 1 BUNGALOW |
|----------------------------------------------------------------|------------|

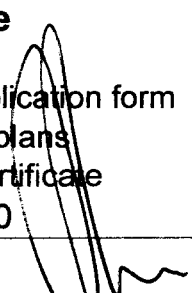
|                                                                         |     |            |
|-------------------------------------------------------------------------|-----|------------|
| C. If building works are proposed, other than residential, please state | N/A | Sq. metres |
| Extra floorspace to be created:                                         |     |            |

|                                                                 |                 |  |        |
|-----------------------------------------------------------------|-----------------|--|--------|
| D. Please state size of any new structure:-                     | (a) max. height |  | metres |
|                                                                 | (b) max. length |  | metres |
|                                                                 | (c) max. width  |  | metres |
| E. Please state type and colour of materials for external walls | OUTLINE ONLY    |  |        |
| F. Please state type and colour of roofing materials            | OUTLINE ONLY    |  |        |

|                                                                                                                                                                                                                                                                    |             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| <b>6. GENERAL INFORMATION</b> Please complete each section                                                                                                                                                                                                         |             |
| A. SITE AREA                                                                                                                                                                                                                                                       | 0.987       |
| B. existing uses Please state existing or, if vacant, the last use(s) of site                                                                                                                                                                                      | RESIDENTIAL |
| C. ACCESS TO ROADS (VEHICULAR AND PEDESTRIAN) (Tick one box)                                                                                                                                                                                                       |             |
| - There will be no new access to a public road and no alteration To any existing access to a public road <input type="checkbox"/><br>- There will be a new or altered access to a public road (give Name of road) <input checked="" type="checkbox"/> STATION ROAD |             |
| D. TREES (Tick one box)                                                                                                                                                                                                                                            |             |
| - The proposal does not involve the felling of any trees <input checked="" type="checkbox"/><br>- The proposal involves the felling of one or more trees <input type="checkbox"/>                                                                                  |             |
| E. DRAINAGE                                                                                                                                                                                                                                                        |             |
| - How will surface water be disposed of?                                                                                                                                                                                                                           | RWS         |
| - For estate developments, how will highway surface water be disposed of?                                                                                                                                                                                          |             |
| - How will foul sewage be disposed of?<br>Mains sewer <input type="checkbox"/> Cesspool <input type="checkbox"/> Septic tank <input checked="" type="checkbox"/> Sewage treatment plant <input type="checkbox"/>                                                   |             |

|                                                                             |                                                                     |
|-----------------------------------------------------------------------------|---------------------------------------------------------------------|
| <b>7. OTHER MATTERS</b>                                                     |                                                                     |
| - Is the proposal in connection with agriculture?                           | <input type="checkbox"/> NO                                         |
| - Is the proposal for industrial, warehousing, offices Or shopping purposes | <input type="checkbox"/> NO if so complete section 8                |
| - Does the applicant own or control adjoining land?                         | <input checked="" type="checkbox"/> YES If so edge in blue on plans |

|                                                                                                                                                                                                            |
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| <b>8. PLANS</b>                                                                                                                                                                                            |
| List of drawings and plans submitted with the application                                                                                                                                                  |
| Note: The proposed means of enclosure, the materials and colour of the walls and roof, landscaping details, etc, should be clearly shown on the submitted plans, unless the application is in outline only |

|                                                                                                                                                                                     |                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|
| <b>Please Complete</b>                                                                                                                                                              |                                            |
| I attach                                                                                                                                                                            |                                            |
| <ul style="list-style-type: none"> <li>• A completed application form</li> <li>• Six copies of all plans</li> <li>• An ownership certificate</li> <li>• A fee of £220.00</li> </ul> |                                            |
| Signed:                                                                                          | On behalf of MR & MRS WALLACE Date: 8.3.03 |

# **OWNERSHIP** **CERTIFICATES**

PLEASE COMPLETE ALL THREE SECTIONS  
IN BLOCK LETTERS

## **1. APPLICANTS INTEREST**

Please state interest in land/buildings  
(e.g. owner, prospective purchaser)

**OWNERS**

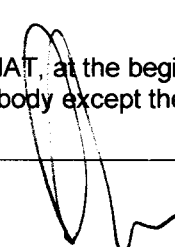
## **2. OWNERSHIP OF THE SITE**

These certificates are to make sure that the owners of the land are aware of applications made on it.

### **Certificate A.**

I CERTIFY THAT, at the beginning of the period of 21 days ending with the date of the accompanying application, nobody except the applicant was the owner of any part of the land to which the application relates.

Signed



On behalf of

**MR & MRS  
WALLACE**

Date

**8.3.03**

or

### **Certificate B.**

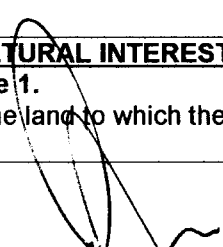
I CERTIFY THAT I have/the applicant has given the requisite notice to everyone else who on the day 21 days before the date of the accompanying application was the owner of any part of the land to which the application relates, as listed below.

**Owners Name**

**Address at which notice was served**

**Date Notice was served**

Signed



On behalf of

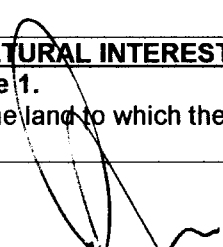
Date

## **3. AGRICULTURAL INTERESTS**

### **Certificate 1.**

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

Signed



On behalf of

**MR & MRS  
WALLACE**

Date

**8.3.03**

or

### **Certificate 2.**

I have/The applicant has given the requisite notice to every person other than my/him/her self who, on the day 21 days before the date of the application, was a tenant of an agricultural holding on all or part of the land to which the application relates, as follows:

**Tenants Name**

**Address at which Notice was served**

**Date Notice was served**

Signed

On behalf of

Date

/ /

Delete as appropriate.

To be completed by applicant or his/her agent and served on owner/tenant

Proposed development at

I GIVE NOTICE THAT

is applying to the South Holland District Council for Planning Permission to

Any owner of the land who wishes to make representations about this application should write to:

Chief Planning Officer, South Holland District Council, Council Offices, Priory Road, SPALDING, Lincs. PE11 2XE  
within 21 days of the date of service of this notice.

Signed

On behalf of

Date