

1. Applicant Name and Address

PO BOX 17 CORPORATION STREET BLACKPOOL, FY1 1LZ

> TEL: (01253) 477477 FAX: (01253) 476201

Email: planning@blackpool.gov.uk

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.co.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.

2. Agent Name and Address

Company (optional): Unit: House number: House suffix: House number: House suffix: House name: Address 1: ITOLMEPIELD ROAD Address 2: Address 3: Town: THORNTON CLEVELES County: LANCASHING Postcode: FY 5 2 RT Company (optional): LINDSAY ORAM ARCH TECT Unit: T House number: House number: House number: Suffix: Mouse number: Suffix: Address 1: FYCREATIVES Address 3: Town: BACK POCC County: LANCASHING Postcode: FY 5 2 RT	Title:	MR First name: JOHN	Title:	Valk First name: The A						
Unit	Last name:	BUCKLEN	Last name:	CRAM						
Unit: Number: suffix:	Company (optional):		Company (optional):							
name: Address 1: HOLMEFIELD ROAD Address 2: FIGUREFIELD ROAD Address 3: Address 3: FOWN: THORNTON CUEVELED County: LANCASHIRE Country: ENGRAND Postcode: FYE ZRT 3. Description of the Proposal Please describe the proposed development, including any change of use: CHANGE OF USE PROM CHIRE TO ENGRUNG (C3) TO TREST PROOK AMOMINO DATION - DWELLING TO BE I BED SELF CONTAINED WITH EXTERNAL Has the building, work or change of use already started? If Yes, please state the date when building, work or change of use been completed? If Yes, please state the date when the building, work or change of use been completed? If Yes, please state the date when the building, work or change of use been completed? If Yes, please state the date when the building, work or change of use been completed? If Yes, please state the date when the building, work or change of use been completed? If Yes, please state the date when the building, work or change of use been completed? 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)	Unit:	1 .:0400	Unit:	1						
Address 2: 154-158 CHIRCH ST Address 3: Town: THORNTON CLEVELEUS County: LANCASHIUL Country: ENGUAND Postcode: FY 6 2 Q T 3. Description of the Proposal Please describe the proposed development, including any change of use: CHANGE OF USE FROM OFFICE TO ENEUMY (C3) TO TREST FLOOR ALLOWMODATION - DWELLING TO BE 1 BED SELF CONTAINED WITH EXTERNIAL REFLUSE GORAGE Has the building, work or change of use already started? Yes please state the date when building, work or use were started (DD/MMYYYY): Has the building, work or change of use been completed? Yes please state the date when the building, work or change of use was completed: (DD/MMYYYY): (date must be pre-application submission) If Yes, please state the date when the building, work or change of use was completed: (DD/MMYYYY): (date must be pre-application submission)	House name:	STONEACRE								
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Postcode: FY 5 2 QT Postcode: FY 6 QT Postco	County:	LANCASHINE	County:	LANCASHINE						
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				\$Date:: 2015-04-02 #\$ \$Revision: 6149 \$						

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House number: 266 a House suffix:	
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: CHMIZCH ST	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name: CLARE JOHNSON
Town: Blackpool	CLARE JOHN JOH
County: LANCASHINE	Reference:
Postcode (optional): PY 1 3PZ	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	DISCUSSIONS RELATING TO INTERNAL SPACE STANDARDS
	INTERNAL SPACE STANDARDS
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste? Ves No
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway? Yes You	REAR YARD
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?	
Do the proposals require any diversions /extinguishments and/or creation of rights of way? Yes No	Have arrangements been made for the separate storage and collection of recyclable waste?
If you answered Yes to any of the above questions, please show	collection of recyclable waste? If Yes, please provide details:
details on your plans/drawings and state the reference of the plan (s)/drawings(s)	
	NOT AS YET
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	Do any of these statements apply to you? Yes No
(d) related to an elected membe If Yes, please provide details of the name, relationship and role	a

	Existing	ula)	Pr	oposed		Not applicable	Don't Know
	(where applicat	ne) 				abl	
Walls							
Roof		N/A					
Windows							
Doors							
Boundary treatments (e.g. fences, walls)	3						
Vehicle access and hard-standing							
Lighting							
Others (please specify)							
Are you supplying ac	ditional information	on on submitted plan(s)/drawing(s)/d	esign and access statemer	nt? Yes		No
If Yes, please state re	eferences for the p	lan(s)/drawing(s)/desi	gn and access s	tatement:			
EXISTINGT PROPOSED	Plans plans	+ 517E F + 517E	PLAN				
10. Vehicle Parki	ing						*
Please provide in	formation on the	existing and proposed					
Type of Veh	nicle	Total Existing	Total p	proposed (including paces retained)	Difference in spaces		
Cars		0		0	0		
Light goods ve public carrier ve	enicles/ ehicles						
Motorcycle	es						· · ·
Disability spa	aces		2. 1.				ŧo.
Cycle spac	es	0		Į.			
Other (e.g. E	Bus)						
Other (e.a. E	Bus)						

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	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.)
Septic tank Other	Yes \
	If Yes, you will need to submit a Flood Risk Assessment to consider
Package treatment plant	the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere?
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable	CIRCUND FLOOR TAKEAWAN FREST PLOOR OFFICE
likelihood that any important biodiversity or geological	FREST PLOOR OFFICE
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	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
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	When did this use end (if known)? DD/MM/YYYY LATE 2021
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)
features: Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development	
No	
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
Ų No	
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the	Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? If Yes, please describe the nature, volume and means of disposal
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	of trade effluents or waste
development or might be important as part of the local landscape character?	
If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a	
Tree Survey, at the discretion of your local planning additionly. 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 design, demolition and construction - Recommendations'.	

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F	ropos	ed l	Hous	ing					Existi	ng F	lousi	ng			
Market	Not	 	Numb	er of	Bedr	ooms	Total	Market	Not		Numb	er of			Total
	known	1_	2	3		Unknown		Housing	known	1	2	3	4+	Unknown	
Houses								Houses				2.70			
Flats and maisonettes		1					V	Flats and maisonettes				170			
Live-work units								Live-work units						/	
Cluster flats								Cluster flats							
Sheltered housing		**						Sheltered housing						/	
Bedsit/studios								Bedsit/studios						-/-	
Unknown type								Unknown type							
	Te	otals	(a + b	+ C +	d + e	+f+g)=	1		T	otals	(a + b	+ C +	d+e	+/f + g) =	
								5.8 3/3					_/	<u> </u>	
Social Rented	Not			,		ooms	Total	Social Rented	Not known	1	Numb	er of		ooms Unknown	Total
	known	1	2	3	4+	Unknown	1	Houses				7	/	OTIKITOWIT	
Houses						-		Flats and maisonettes		-	 	1			
Flats and maisonettes						//		Live-work units		40.3					
Live-work units					_	<i>X</i>		Cluster flats		- F/42 - 0E					
Cluster flats					1			Sheltered housing			1/1	7	A.		
Sheltered housing					$/\!\!\!/$		ļ	Bedsit/studios				/	7 1 -		
Bedsit/studios				/				Unknown type		1	1				
Unknown type	T	otale	(2+1)	1/	F C/ + 4	$\Rightarrow + f + g) =$		Onknown type		otals	(a + b	+ C +	d+e	+ f + g) =	
		Otais	7 (a · L	7.0		, , , , g) -	1	<u> </u>	7	7					<u> </u>
Intermediate	Not known	1	Nym 2	ber o	f Bed	rooms Unknowr	Total	Intermediate	Not known	1	Numl 2	per of	Bedro 4+	ooms Unknown	Tota
Houses			1					Houses					<u></u>		
Flats and maisonettes	; 🗆	1						Flats and maisonettes	/ 🗆						
Live-work units								Live-work units /			3			50	
Cluster flats								Cluster flats						3 1 (3.3%)	
Sheltered housing								Sheltered housing				201.00000			
Bedsit/studios	1/0			is and the second				Bedsit/studios /							
Unknown type								Unknown type							
	Т	otals	(a + l) + C	+ d + e	e + f + g) =			T	otals	(a + t) + C +	d+e	+f+g)=	
									<u> </u>	,					
Key worker	Not					rooms	Total	Key worker	Not known	1	Num 2	per of	Bedr	ooms Unknowr	Tota
	known	1	2	3	4+	Unknow		Houses	I C			3	41	CHRIOWI	1
Houses Flats and maisonettes								Flats/and maisonettes							
Live-work units		ļ <u>-</u>	1		+-			Live-work units		 					<u> </u>
Cluster flats		ļ	-	-	<u> </u>		1	Cluster flats		<u> </u>				12 34 3	
Sheltered housing			-	-				Sheltered housing		-			777 (a 17 ama		+
Bedsit/studios				-	-		-	Bedsit/studios				N 102			
				-				Unknown type					-		1
Unknown type	Ц	otale	\ \(a + 1	<u> </u>	+ d +	e + f + g) =	1	Olikilowii type	<u> </u>	otals	(a + l) + G +	 d+e	+ f + g) =	-
		- care	- _[u ·]				<u> </u>			1332 33					
Total proposed	rasidan	tial u	nits	/A -	+ B + 6	C+D)=	1 1	Total existing	reside	ntial	units	Œ	+F+((3+H)=	

Does you	Types of Developme or proposal involve the los	ss, ga	n or change of u	se of non-reside	ential floorsp] No
If yo	u have answered Yes to	the qu	estion above ple	ase add details	in the follow	ing table:	
Us	e class/type of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by o use or den (square m	hange of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Shops						
	Net tradable area:						
A2	Financial and professional services						
A3	Restaurants and cafes				<u>-</u>		
A4	Drinking establishments						
A 5	Hot food takeaways						
B1 (a)	Office (other than A2)		64	64	/	64	0
B1 (b)	Research and development					1	
B1 (c)	Light industrial						
B2	General industrial				100		
B8	Storage or distribution						
C1	Hotels and halls of residence						
C2	Residential institutions				***************************************		
D1	Non-residential institutions						
D2	Assembly and leisure						
OTHER					-		
Please Specify							
Specify	Total						
In ac	ddition, for hotels, residen	itial in	stitutions and ho	stels, please ad	ditionally inc	licate the loss or gain of	rooms
	Type of use Not applicable		ing rooms to be l of use or dem	ost by change	Total room	is proposed (including langes of use)	Net additional rooms
C1	Hotels	J Janes					
C2	Residential Institutions						
OTHER							
Please Specify							
19. Em	ployment	* * *			•1/	4	
Please o	complete the following inf	forma	tion regarding er	nployees:	N/		
			Full-time	- Part-	time		al full-time quivalent
Ex	isting employees						
Pro	posed employees		00-00-00-00-00-00-00-00-00-00-00-00-00-				
	urs of Opening	f	-i (45.20)			N/	4
ii known	, please state the hours o	10				Sunday and	Nat land
	Use M	onday	/ to Friday	Saturday		Bank Holidays	Not known
				200 1000 1000 1000 1000 1000 1000 1000		3 5	3 3 23 23 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
04 61						<u> </u>	
21. Site		W/900	000				
Please st	tate the site area in hectar	es (ha	0.012	HA.			

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22. Industrial or Commercial Processes and Machinery								
lease describe the activities and processes which would e carried out on the site and the end products including lant, ventilation or air conditioning. Please include the upper of machinery which may be installed on site:								
		t? Yes No	1000 1000					
Is the proposal a waste management develo								
If the answer is res, please complete the following			o motros	_				
	Not applicable	The total capacity of the void in cubic including engineering surcharge and allowance for cover or restoration matter tonnes if solid waste or litres if liquid	making no aterial (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)				
Inert landfill								
Non-hazardous landfill								
Hazardous landfill								
Energy from waste incineration								
Other incineration	$\bar{\Box}$							
Landfill gas generation plant			/					
Pyrolysis/gasification			/					
Metal recycling site	H							
Transfer stations								
Material recovery/recycling facilities (MRFs)	H							
Household civic amenity sites	H							
Open windrow composting	片	N/X.						
In-vessel composting			2 7 2 2 2					
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)	<u> </u>							
Sewage treatment works								
Other treatment								
Recycling facilities construction, deviolition and excavation waste								
Storage of waste								
Other waste management								
Other developments								
Please provide the maximum annual opera	tional	throughput of the following waste stream	ams:					
Municipal	- 10 to 10 t							
Construction, demolition and e		ation						
Commercial and indust	rial							
Hazardous			Accessed the form					
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 the following materials in the quantities state			Not applica	able s				
If Yes, please provide the amount of each su			• •					
Acrylonitrile (tonnes)		Ethylene oxide (tonnes)		Phosgene (tonnes)				
Ammonia (tonnes)	Hyd	rogen cyanide (tonnes)	Su	Ilphur dioxide (tonnes)				
Bromine (tonnes)	Liquid oxygen (tonnes)		Flour (tonnes)					
Chlorine (tonnes)	quid	petroleum gas (tonnes)	Refine	d white sugar (tonnes)				
Other:		Other:						
Amount (tonnes):	2000	Amount (tonnes)):					

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding* NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* and/or agricultural tenant** of any part of the land or building to which this application relates. owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 **Date Notice Served** Name of Owner / Agricultural Tenant Address

Or signed - Agent:

Signed - Applicant

Date (DD/MM/YYYY):

		and Dealeastine (atinuad)	
24. Ownership Certificates and Agr				
	CERTIFICATE	OF OWNERSHIP - CERTI	FICATE C	day Auttala 44
Town and Country Planning (Develo	pment Mana	agement Procedure) (Eng	gland) Order 2015 Certificate	under Article 14
I certify/ The applicant certifies that:		nalication		
 Neither Certificate A or B can be issu All reasonable steps have been take 	ed for this at	oplication	of the other owners* and/or an	ricultural tenants** of
 All reasonable steps have been take the land or building, or of a part of it, 	n to lina out	the names and addresses	shle to do so	rioditara toriagno o
* "owner" is a person with a freehold interest or	leasehold inte	erest with at least 7 years le	ft to run.	
** "agricultural tenant" has the meaning given in	n section 65/8	B) of the Town and Country	Planning Act 1990	
	, 30011011 0010	,, or 1, or 7 or 1, and element		
The steps taken were:				1
				D-t- Notice Compad
Name of Owner / Agricultural Tenant		Address		Date Notice Served
	200 VIII I			
	/			
1				
Notice of the application has been published	d in the follov	wing newspaper	On the following date (which	must not be earlier
(circulating in the area where the land is situ	ated):		than 21 days before the date	of the application):
		9 19 19 19 19 19 19 19 19 19 19 19 19 19		
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
- Garage				
		L		
(CERTIFICATE	OF OWNERSHIP - CERT	IFICATE D	
Town and Country Planning (Develo	pment Mana	gement Procedure) (En	gland) Order 2015 Certificate	under Article 14
I certify/ The applicant certifies that:		, ,		
 Certificate A cannot be issued for this 	s application			
 All reasonable steps have been taker 	to find out th	ne names and addresses o	of everyone else who, on the da	y 21 days before the
date of this application, was the own	er* and/or a	gricultural tenant^ of any	part of the land to which this a	pplication relates, but I
have/ the applicant has been unable * "owner" is a person with a freehold interest or I	10 00 SO. Ioggaphold into	proct with at least 7 years let	t takin	
** "agricultural tenant" has the meaning given in	easenoiu inte section 65/8	R) of the Town and Coupty	Planning Act 1990	
	r section obje	n) of the rown and coming	raining Act 1990	
The steps taken were:				
				1
	_			
<u> </u>		4 344 000000 0		
Notice of the application has been published	I in the follow	ing newspaper	On the following date (which	must not be earlier
(circulating in the area where the land is situation	ated):		than 21 days before the date	or the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
отдено трупости.		or signou / tgont.		23.0 (22.131.01 1 1 1).
	-			
H	I	1		

25. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application being deemed inv the Local Planning Authority (LPA) has been submitted.	valid. It will not be considered valid until all information required by
The original and 3 copies* of a completed and dated application form:	The correct fee: APPLICANT
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 other plans and drawings or information necessary to describe the subject of the application: *National legislation specifies that the applicant must provide the original decision and the provides the plan which identifies the plan which i	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 the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):
total of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by pyou can check your LPA's website for information or contact their plants.	y or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick).
26. Declaration I/we hereby apply for planning permission/consent as described in t information. I/we confirm that, to the best of my/our knowledge, any	his form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them.	Date (DD/MM/YYYY):
Signed - Applicant: Or signed - Agent:	N 01 2022 (date cannot be pre-application)
27. Applicant Contact Details	28. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
29. Site Visit	
Can the site be seen from a public road, public footpath, bridleway of	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: