

This form is specifically designed to be printed and completed offline.
Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

Application for Planning Permission

Town and Country Planning Act 1990 (as amended)

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Address: Development Management

Cheshire West and Chester Council, 4 Civic Way, Ellesmere Port, CH65 OBE

Tel: 0300 123 7027

Email: planning@cheshirewestandchester.gov.uk **Web:** www.cheshirewestandchester.gov.uk



Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website. Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

1. Applic	ant Name and Address
Title:	Mr First name: P
Last name:	Cosnet
Company (optional):	c/o Trevor Mennell Planning
Unit:	House House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	Shrewsbury
County:	Shropshire
Country:	
Postcode:	SY3 0EH

2. Agent	Name and	d Address									
Title: Mr		First name:	First name: Trevor								
Last name:	Mennell										
Company (optional):	Trevor N	Trevor Mennell Planning									
Unit:		House House suffix:									
House name:	The Gab	The Gables									
Address 1:	Kendrid	Kendricks Bank									
Address 2:	Baysto	n Hill									
Address 3:											
Town:	Shrews	bury									
County:											
Country:											
Postcode:	SY3 0EH										

3. Description of the Proposal	
Please describe the proposed development, including any change of	use:
Change of Use of existing camping site and dis-used stone pods, tents, mobile caravans together with 2 no. toilet / s vehicular access	
Has the building, work or change of use already started?	Yes X 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 X 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)
Reference number of permission in principle being relied on (technical details consent applications only):	
Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/595 as amended by article 3 of S.I. 746/2021)?	Yes No
A. Site Address Details Please provide the full postal address of the application site. Unit:	S. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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?

6. Pedestrian and Vehicle Access, Road	s and Right	s of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway?	X Yes	☐ No	Do the plans incorporate areas to store and aid the collection of waste? X Yes No
Is a new or altered pedestrian			If Yes, please provide details:
access proposed to or from the public highway?	X Yes	☐ No	Bin storage with private waste collection
Are there any new public roads to be provided within the site?	Yes	X No	
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	х No	
Do the proposals require any diversions /extinguishments and/or creation of rights of way?	Yes	х №	Have arrangements been made for the separate storage and collection of recyclable waste? X Yes No
If you answered Yes to any of the above que details on your plans/drawings and state the (s)/drawings(s)			If Yes, please provide details: Recycling storage bins with private waste collection
Plan - 71284:1001 - Block Plan			
8. Authority Employee / Member			
means related, by birth or otherwise, closely conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that there was bias on the part of the conclude that the conclude the conclude the conclude that there was bias on the part of the conclude	enough that ne decision-m	a fair-minde naker in the	· ·
Do any of the following statements apply to	you and/or a	gent?	Yes X No 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
If Yes, please provide details of their name, r	ole and how	you are rela	ted to them.

9. Materials If applicable, please sta	te what ma	terials are to be used extern	ally. Include	type, colour and name for e	each material:		
	Existing (where ap	plicable)		Proposed	Not applicable	Don't Know	
Walls				Toilet / Shower Blocks Blockwork	- Timber Clad		
Roof				Toilet / Shower Blocks	s - Plain Tile Roof		
Windows				Toilet / Shower Blocks uPVC	s - Timber effect		
Doors				Toilet / Shower Block uPVC	s - Timber effect		
Boundary treatments (e.g. fences, walls)	Existin	g trees and hedgerows		Additional hedgerows, trees and post / rail fencing			
Vehicle access and hard-standing	Existing	gdrive entrance - Bitmad	;	Entrance and parking bit-mac Tracks - Grasscrete			
Lighting							
Others (please specify)							
Are you supplying add	itional info	rmation on submitted plan(s	s)/drawing(s)/design and access stateme	nt? X Yes		No
Design and Access	Statemer		- Block Pla	s statement: an / Plan No: 71284:100: er Block / Plan No: 71284			Pod
10. Vehicle Parkin	a	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
	•	the existing and proposed r	number of or	n-site parking spaces:			
Type of Vehic	le	Total Existing		l proposed (including spaces retained)	Difference in spaces	!	
Cars		7		21	14		
Light goods vehi public carrier veh	icles/ nicles						
Motorcycles	;						
Disability space	es						

10

Cycle spaces

Other (e.g. Bus)

Other (e.g. Bus)

0

10

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 X No
X Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes X No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes X 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? Yes X No
plan(s)/drawing(s):	How will surface water be disposed of?
	X Sustainable drainage system Existing watercourse
	X Soakaway Pond/lake
	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 likelihood that any important biodiversity or geological	Camping Site (Planning Ref: 4/33768
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? Yes X No
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	When did this use end (if known)?
X No	DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development X No	Land which is known to be contaminated? Yes X No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes X 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? Yes Yes
X No	to the presence of contamination:
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? X Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes X No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character? Yes X No	Of trade efficients of waste
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 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	

	Propos	ed	Hous	ina					Existi	na I	Hous	ina			
Market	Not		Numl		Bedr	ooms	Total	Market	Not		Numl		Bedr	ooms	Tota
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknown	
Houses							а	Houses							а
Flats/maisonettes							Ь	Flats/maisonettes							Ь
Sheltered housing							С	Sheltered housing							С
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other							f
		То	tals (a	ı + b +	c + d	(+e+f)=	Α			То	tals (c	ı + b +	- c + d	+e+f)=	F
Social, Affordable	Nat		Numl	oer of	Bedr	ooms	Total	Social, Affordable	Not		Numl	oer of	Bedr	ooms	Tota
or Intermediate Rent	Not known	1	2	3	4+	Unknown		or Intermediate Rent	Not known	1	2	3	4+	Unknown	
Houses	+			-			а	Houses	+		_	_			а
Flats/maisonettes							Ь	Flats/maisonettes							Ь
Sheltered housing							С	Sheltered housing							
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							e
Other							f	Other							f
Other		To	tals (a	 + b +	c+d	(+e+f)=	В	Other		To	tals (d	 + b +	c + d	+ e + f) =	G
	1												_		
Affordable Home Ownership	Not known	1	Numi 2	per or		ooms Unknown	Total	Affordable Home Ownership	Not known	1	Numi 2	per of		ooms Unknown	Tota
Houses			_				а	Houses		•					а
Flats/maisonettes							Ь	Flats/maisonettes							Ь
Sheltered housing							С	Sheltered housing							С
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other							f
		То	tals (a	ı + b +	c + d	(+e+f)=	С			To	tals (a	ı + b +	c + d	+e+f)=	Н
	NI.		Numl	ner of	Rodr	ooms	Total		Not Number of Bedrooms			ooms	Tota		
Starter Homes	Not known	1	2	3		Unknown		Starter Homes	known	1	2	3		Unknown	+
Houses							а	Houses							а
Flats/maisonettes							Ь	Flats/maisonettes							Ь
Bedsit/studios							С	Bedsit/studios							С
Other							d	Other							d
			To	tals (a + b	+ c + d) =	D		'		To	tals (a + b	+ c + d) =	1
Self Build and	Not		Numl	oer of	Bedr	ooms	Total	Self Build and	Not		Numl	oer of	Bedr	ooms	Tota
Custom Build	known	1	2	3	4+	Unknown		Custom Build	known	1	2	3	4+	Unknown	+
Houses							а	Houses							а
Flats/maisonettes							Ь	Flats/maisonettes							Ь
Bedsit/studios							С	Bedsit/studios							С
Other							d	Other					_		d
			To	tals (a + b	+c+d)=	Ε				To	tals (a + b	+c+d)=	J
		_	_	_											
Total proposed re	sidential	unit	c (A	1 P 1	$C + \Gamma$	0 + E) =		Total existing r	ocidontia	ds	ite	(E + C		(1 + J) =	

	· ·	•		Non-resident in or change of u	-		pace? Yes	< No
•				estion above plea				K NO
	se class/type		Not applicable		Gross internal to be lost by use or der	floorspace change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A 1	Sh	ops						
	Net trad	able area:						
A2		cial and nal services						
А3		ts and cafes						
A4	Drinking est	tablishments						
A 5	Hot food	takeaways						
B1 (a)	Office (oth	er than A2)						
B1 (b)		rch and opment						
B1 (c)		ndustrial						
B2	General	industrial						
B8	_	distribution						
C1		nd halls of lence						
C2	Residential	institutions						
D1		sidential utions						
D2		and leisure						
OTHER								
Please Specify								
	To	otal						
In ad	dition, for ho	tels, residen	tial ins	stitutions and ho	stels, please ad	ditionally inc	licate the loss or gain of	rooms
Use class	Type of use	Not applicable	Existi	ng rooms to be l of use or dem	lost by change olition		s proposed (including anges of use)	Net additional rooms
C1	Hotels							
C2	Residential Institutions							
OTHER								
Please Specify								
===== 19. Em	ployment							
Please co	omplete the	following inf	ormat	tion regarding er	mployees:			
				Full-time	Part-	-time		al full-time quivalent
Ex	isting employ	yees		0	2			1
Pro	posed emplo	yees		1	2	<u>)</u>		2
20. Ho	urs of Ope	ning						
If known	, please state	e the hours o	f oper	ning (e.g. 15:30) f	for each non-re	sidential use	· · ·	T
	Use	М	onday	/ to Friday	Saturda	у	Sunday and Bank Holidays	Not known
21. Site	0 Aros							

0.97

Please state the site area in hectares (ha)

22. Industrial or Commercial Processes and Machinery											
be carried out on the site and the end produ plant, ventilation or air conditioning. Please	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 develo	pment?	Yes	χ No								
If the answer is Yes, please complete the foll		ble:									
	in <u>licab</u>	cluding engli Illowance for	acity of the void in neering surcharge cover or restoratio d waste or litres if	and making on material (d	throughput in tonnes						
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 operat	ional thro	oughput of th	e following waste	streams:							
Municipal											
Construction, demolition and e		า									
Commercial and indust	rial										
Hazardous			1								
If this is a landfill application you will need t planning authority should make clear what	o provide informati	further infor on it requires	mation before you s on its website.	ır applicatior	n can be determined. Your waste						
23. Hazardous Substances											
Does the proposal involve the use or storage the following materials in the quantities stat			X No	Not app	blicable						
If Yes, please provide the amount of each su	bstance t	hat is involve	ed:								
Acrylonitrile (tonnes)	Ethyl	lene oxide (to	onnes)		Phosgene (tonnes)						
Ammonia (tonnes)	Hydroge	en cyanide (to	onnes)		Sulphur dioxide (tonnes)						
Bromine (tonnes)	Liqu	id oxygen (to	onnes)		Flour (tonnes)						
Chlorine (tonnes)	quid petro	oleum gas (to	onnes)	Ref	fined white sugar (tonnes)						
Other:			Other:								
Amount (tonnes):			Amount (ton	nes):							

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**	<i>y</i> · · · · · · · · · · · · · · · · · · ·	,	,
NOTE: You should sign Certificate B, C application relates but the land is, or i	or D, as appropi s part of, an agri	riate, if you are the sole owner of the land or buildi cultural holding.	ng to which the
* "owner" is a person with a freehold intere ** "agricultural holding" has the meaning	st or leasehold int given by reference	erest with at least 7 years left to run. to the definition of "agricultural tenant" in section 65(8)	of the Act.
Signed - Applicant:		Or signed - Agent:	Date (DD/MM/YYYY)
			09/03/2022
I certify/ The applicant certifies that I ha 21 days before the date of this applicati application relates. * "owner" is a person with a freehold intere	ve/the applicant on, was the owne st or leasehold int	agement Procedure) (England) Order 2015 Certific has given the requisite notice to everyone else (as lis er* and/or agricultural tenant** of any part of the lar erest with at least 7 years left to run. 8) of the Town and Country Planning Act 1990	ted below) who, on the da
Name of Owner / Agricultural Tenant		Address	Date Notice Served
Cheshire West and Chester Council Highways Authority		partment, Guilden Sutton Offices, Guilden Guilden Sutton, Chester CH3 7EX	09/03/2022
Signed - Applicant		Or signed - Agent:	Date (DD/MM/YYYY)
			00/00/0000

Signed - Applicant	Or signed - Agent:	Date (DD/MM/YYYY)
		09/03/2022

24. Ownership Certificates and Agricultural Land Declaration (continued) **CERTIFICATE OF OWNERSHIP - CERTIFICATE C** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. * "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 The steps taken were: Name of Owner / Agricultural Tenant Date Notice Served Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so.

"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

**	"agricultural	tenant"	has the me	eanina aiv	en in s	section 65	(8) of th	e Town a	nd Countr	v Plannina	Act :	1990

The steps taken were: Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Or signed - Agent: Signed - Applicant: Date (DD/MM/YYYY):

25. 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 (LPA) 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 a fire statement, if required
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.	(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):
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options. Plans can be bought from one of the Planning Portal's accredited suppliers: https://www.planningportal.co.uk/buyaplanningmap	
Tians can be bought from one of the Tianning Fortal's accreated suppliers. https://www.plaininigportal.co.aiv,buyuplaininighap	
26. Declaration I/we hereby apply for planning permission/consent as described in this information. I/we confirm that, to the best of my/our knowledge, any fagenuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent:	plans/drawings and additional acts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY): 09/03/2022 (date cannot be pre-application)
27. Applicant Contact Details 28. Agent Contact Details	
	-
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
Eman address (optional).	trevor@tmplanning.co.uk
	ti evoi e tripiarii iig.co.ak
29. Site Visit	
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes X No	
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	X Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:	— agent/applicant's details/
Contact name:	Telephone number:
Email address:	