

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:

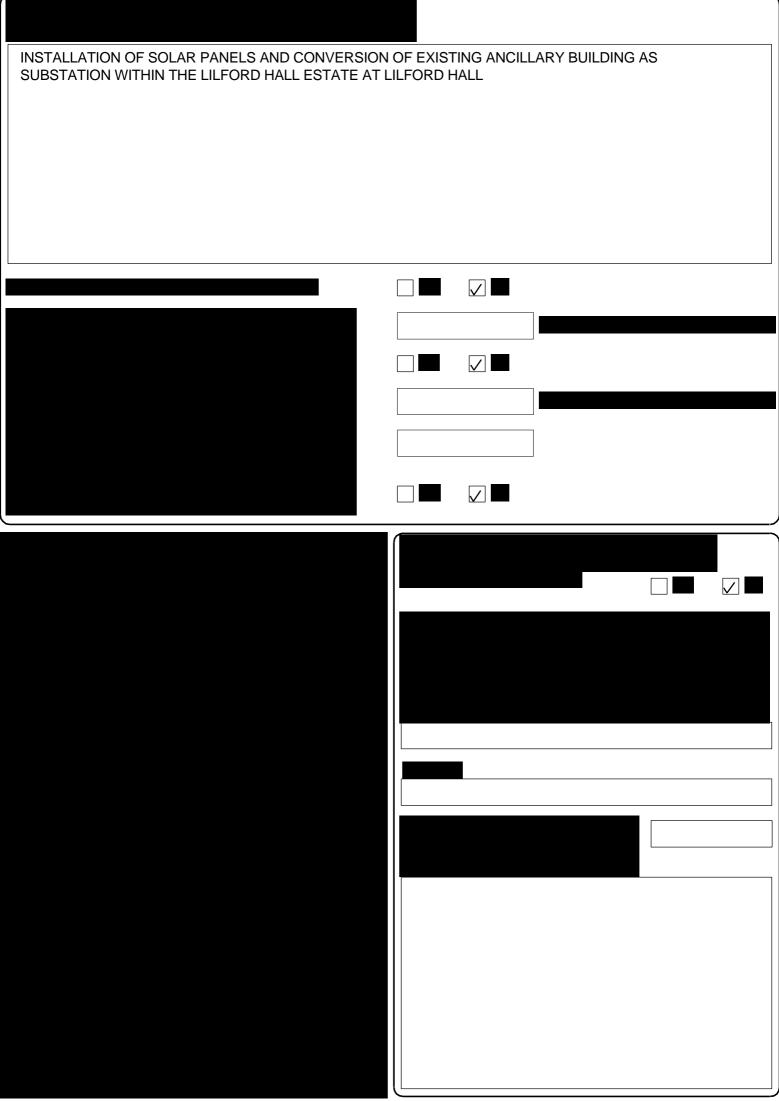


Development Management Service Thrapston Office Cedar Drive Thrapston NN14 4LZ Tel: 01832 742056 www.northnorthants.gov.uk

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.

IICHAEL	NIMA
BLOCH	STANIEWICK
	56
	ACORN COTTAGE
	56 STATION ROAD
LILFORD	NASSINGTON
NORTHAMPTONSHIRE	CAMBRIDGESHIRE
UNITED KINGDOM	UNITED KINGDOM
PE8 5SG	PE8 6QB



6. Pedestrian and Vehicle Access, Road	s and Right	s of Way	7. Waste Storag	ge and Collection		· · · · ·
Is a new or altered vehicle access proposed to or from the public highway?	Yes	V No	Do the plans incorpo and aid the collecti		Yes	No No
Is a new or altered pedestrian access proposed to or from			If Yes, please provi	ide details:		
the public highway?	Yes	✓ No				
Are there any new public roads to be provided within the site?	Yes	V 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	Have arrangements for the separate sto collection of recycla	orage and	Yes	VNo
If you answered Yes to any of the above qu details on your plans/drawings and state the (s)/drawings(s)	estions, plea reference of	ase show f the plan	If Yes, please provid			
8. Authority Employee / Member It is an important principle of decision-making means related, by birth or otherwise, closely conclude that there was bias on the part of	enough tha	it a fair-mind	led and informed obse	erver, having considere		
Do any of the following statements apply to	you and/or a	agent?	(a) (b) (c)	ith respect to the authori a member of staff an elected member related to a member of s related to an elected me	staff	
If Yes, please provide details of their name, r	ole and how	you are rela				

9. Materials

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

if applicable, please stat	e what materials are to be used externally. Include	type, colour and name for each material:						
	Existing (where applicable)	Proposed	Not applicable	Don't Know				
Walls			\checkmark					
Roof			\checkmark					
Windows			\checkmark					
Doors			\checkmark					
Boundary treatments (e.g. fences, walls)		A FARM FENCE WILL BE INSTALLED AROUND THE PERIMETER OF THE SITE WITH HEDGEROW PLANTED IN FRONT						
Vehicle access and hard-standing			\checkmark					
Lighting			\checkmark					
Others (please specify)			\checkmark					
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?								
If Yes, please state refe	erences for the plan(s)/drawing(s)/design and acce	ss statement:						
LANDSCAPING IMMEDIATELY SURROUNDING THE SITE HAS BEEN REFERENCED WITHIN THE PLANNING, DESIGN & ACCESS STATEMENT AS WELL AS A DETAILED DESIGN REPORT THROUGHOUT								

BROWNFIELD SITE, CURRENTLY LOW GRADE PASTURE LAND
A CLEARED WWII HOSPITAL (1940'S)
Econ 2021

ECAB 2021

	Propos			•	Dadu		Tatal	[Existi	-		-	Dedu	0.000	-
Market Housing	Not known	1	Numt 2	2007 OF		ooms Unknown	Total	Market Housing	Not known	1	Numb	3		Unknown	Total
Houses							а	Houses							а
Flats/maisonettes							b	Flats/maisonettes							b
Sheltered housing							С	Sheltered housing							С
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats		-					е
Other							f	Other							f
		Tot	als (a	+ b +	c + d	+ e + f) =	Α	Totals $(a + b + c + d + e + f) = F$				F			
Social, Affordable	Not		Numb	per of	Bedr	ooms	Total	Social, Affordable	Not	Number of Bedrooms		Total			
or Intermediate Rent	known	1	2	3	4+	Unknown		or Intermediate Rent	known	1	2	3	4+	Unknown	
Houses							а	Houses							а
Flats/maisonettes							b	Flats/maisonettes							b
Sheltered housing							С	Sheltered housing							С
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other							f
Totals $(a + b + c + d + e + f) =$				В		Totals $(a + b + c + d + e + f) = 0$			G						
Affordable Home Ownership	Not known	1	Numt	ber of		ooms Unknown	Total	Affordable Home Ownership	Not known	1	Numb	er of		ooms Unknown	Total
Houses					···		а	Houses		-	-				а
Flats/maisonettes							b	Flats/maisonettes							b
Sheltered housing							С	Sheltered housing							С
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other							f
		Tot	als (a	+ b +	c + d	+ e + f) =	С			То	tals (a	+ b +	c + d	+ e + f) =	Н
	Not		Numb	per of	Bedr	ooms	Total		Not		Numb	er of	Bedro	oms	Total
Starter Homes	known	1	2	3	4+	Unknown	1	Starter Homes	known	1	2	3	4+	Unknown	
Houses							а	Houses							а
Flats/maisonettes							b	Flats/maisonettes							b
Bedsit/studios							С	Bedsit/studios							С
Other							d	Other							d
			То	tals (a + b ·	+ c + d) =	D				То	tals (a + b	+ c + d) =	/
Self Build and Custom Build	Not known	1	Numt	per of 3		ooms Unknown	Total	Self Build and Custom Build	Not known	1	Numb	er of 3		ooms Unknown	Total
Houses							а	Houses							а
Flats/maisonettes							b	Flats/maisonettes							b
Bedsit/studios							С	Bedsit/studios							С
Other							d	Other							d
			То	tals (a + b ·	+ c + d) =	Е				То	tals (a + b	+ c + d) =	J
Total proposed res	sidential	units	(A	+ B +	C+D	+ E) =		Total existing r	esidentia	l uni	ts (F+G	+ <i>H</i> +	l + J) =	

	••	•		Non-resident	•			
-			-	n or change of u estion above ple				No
	se class/type		Not applicable	Existing gross internal floorspace (square metres)	Gross interna to be lost by use or de (square r	floorspace change of molition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Sh	ops						
		able area:						
A2		ial and al services						
A3	Restaurant	s and cafes						
A4	Drinking es	tablishments						
A5		akeaways						
B1 (a)	•	er than A2)						
B1 (b)	develo	rch and opment						
B1 (c)	Light ir	ndustrial						
B2	General	industrial						
B8		distribution						
C1		nd halls of lence						
C2		institutions						
D1		sidential utions						
D2	Assembly	and leisure						
OTHER								
Please Specify								
	Тс	otal						
In add	dition, for hot	-				,	icate the loss or gain of	rooms
Use class	Type of use	Not applicable	Existi	ing rooms to be l of use or der	ost by change nolition	Total room ch	ns proposed (including manges of use)	Net additional rooms
C1	Hotels							
	Residential Institutions							
OTHER								
Please Specify								
9. Em	ployment	t						
Please c	complete the	following inf	ormat	ion regarding en	nployees:			
				Full-time	Part	-time		tal full-time quivalent
Exi	isting employ	/ees						
Pro	posed emplo	yees						
20. Hou	urs of Ope	ning						
lf known,	please state	the hours of	open	ing (e.g. 15:30) f	or each non-res	idential use	· ·	T
Use Mo			onday	/ to Friday	Saturda	у	Sunday and Bank Holidays	Not known
21. Site	Area							
lease st	ate the site a	rea in hectare	es (ha)	0.99 HECTA	RES			

0.00112017442	rease state the site area in nectares (na) 0.99 HECTA	RE
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22. Industrial or Commercial Proces	sses and M	achinery				
Please describe the activities and processes be carried out on the site and the end produc plant, ventilation or air conditioning. Please type of machinery which may be installed of	cts including e include the	SOLAR INSTALLATION (SPIKED) INCLUDING UPGRADING EXISTING CABLING, INVERTERS AND TRANSFORMERS				
Is the proposal a waste management dev	elopment?	Yes	V No			
If the answer is Yes, please complete the fo	ollowing table	:				
	includ <u>includ</u> allowa	ing engine ance for co	ity of the void in cubic metres, ering surcharge and making no over or restoration material (or waste or litres if liquid waste)	Maximum annual operational throughput in tonnes (or litres if liquid waste)		
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	\square					
Other treatment	\checkmark					
Recycling facilities construction, demolition and excavation waste						
Storage of waste						
Other waste management						
Other developments						
Please provide the maximum annual operat	tional through	put of the	-			
Municipal			N/A			
Construction, demolition and e			N/A			
Commercial and industri	al		N/A			
Hazardous If this is a landfill application you will need to	o provido furt	hor inform:	N/A	be determined. Your waste		
planning authority should make clear what	t information	it requires	on its website.	be determined. Four waste		
		-				

24. Ownership Certificates and	Agricultural Land Declaration							
One Certificate A, B, C, or D, must be completed with this application form								
Town and Country Blanning (D	CERTIFICATE OF OWNERSHIP - CERTIFICATE A	ndar Articla 11						
I certify/The applicant certifies that on the	evelopment Management Procedure) (England) Order 2015 Certificate under day 21 days before the date of this application nobody except myself/ the the day 21 days before the dates, and that none of the land to which the application relates, and that none of the land to which the application the dates.	ne applicant was the						
NOTE: You should sign Certificate B, C application relates but the land is, or	or D, as appropriate, if you are the sole owner of the land or building to v is part of, an agricultural holding.	/hich the						
	st or leasehold interest with at least 7 years left to run. iven by reference to the definition of "agricultural tenant" in section 65(8) of the	Act.						
Signed - Applicant:	On signed Areast	Date (DD/MM/YYYY):						
		05/12/2022						
21 days before the date of this applicat application relates. * "owner" is a person with a freehold interest	ve/the applicant has given the requisite notice to everyone else (as listed to tion, was the owner* and/or agricultural tenant** of any part of the land o st or leasehold interest with at least 7 years left to run. yen in section 65(8) of the Town and Country Planning Act 1990	r building to which this						
Name of Owner / Agricultural Tenant	Address	Date Notice Served						

Signed - Applicant:

Date (DD/MM/YYYY):

05/12/2022

24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C								
 I certify/ The applicant certifies that: Neither Certificate A or B can be iss All reasonable steps have been ta 	elopment Management Procedure) (E sued for this application ken to find out the names and address	es of the other owners* and/or ac						
the land or building, or of a part or * "owner" is a person with a freehold interest of ** "agricultural tenant" has the meaning given	f it, but I have/ the applicant has been or leasehold interest with at least 7 years	unable to do so. <i>left to run.</i>	,					
The steps taken were:								
Nome of Ourser / Agricultural Tanant			Defe Nution Operation					
Name of Owner / Agricultural Tenant	Addres	S	Date Notice Served					
Notice of the application has been publish	ed in the following newspaper	On the following date (whic	h must not be earlier					
(circulating in the area where the land is s	situated):	than 21 days before the date	e of the application):					
Signed - Applicant:	O nin inin t:		Date (DD/MM/YYYY):					
			05/12/2022					
I certify/ The applicant certifies that:	CERTIFICATE OF OWNERSHIP - CEI lopment Management Procedure) (E		under Article 14					
date of this application, was the ov have/ the applicant has been unal * "owner" is a person with a freehold interest of ** "agricultural tenant" has the meaning given	ken to find out the names and addresse vner* and/or agricultural tenant** of ar ble to do so. r leasehold interest with at least 7 years l	ny part of the land to which this a <i>left to run.</i>	day 21 days before the pplication relates, but l					
The steps taken were:								
Notice of the application has been publishe (circulating in the area where the land is s	ed in the following newspaper ituated):	On the following date (whic than 21 days before the date						
Signed - Applicant:	Or signed - Agent:		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 formation required will result in your application being deemed invalid. It will not be considered the Local Planning Authority (LPA) has been submitted.						
The original and 3 copies* of a completed and dated The correct fee:		\checkmark				
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:	nd guidance notes for o of a fire statement, if rec	details):				
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application: C certificate (A, B, C or D – a and Article 14 Certificate (A)	of the completed, dated s applicable)					
*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.planningp	ortal.co.uk/buyaplannin	gmap				
26. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompany information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accur genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: 27. Applicant Contact Details 28. Agent Contact Details Telephone numbers Telephone numbers	rate and any opinions g Date (DD/MM/YYYY) 05/12/2022	given are the				
Country code: National number: number: Country code: National number Country code: Mobile number (optional): Country code: Mobile number Country code: Fax number (optional): Country code: Fax number Email address (optional): Email address (optional): Email address (optional):		Extension number:				
29. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) If Other has been selected, please provide: Contact name: Telephone number: Email address:		lifferent from the olicant's details)				