

City of Lincoln Council

Directorate of Development & Environmental Services

City Hall

Beaumont Fee

Lincoln LN1 1DF

01522 873474/484/731

Email: developmentteam@lincoln.gov.uk

## Application for Planning Permission. Town and Country Planning Act 1990

Phone:

## 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

	_	and Address					nd Address	Sing or your application.			
Title:	Mr	First name: Graham			Title:	Mr	First name:				
Last name:	Smith			Last name:	Milnes						
Company (optional):	Saxilby Co	onstruction Ltd		Company (optional):	Gary Milnes Design Ltd						
Unit:		House number:	House suffix:		Unit:		House number: 62	House suffix:			
House name:	Carlton Lo	odge			House name:						
Address 1:	Main Stree	et		Address 1:	Sudbrooke Lane						
Address 2:	North Carlton				Address 2:	Nettleham					
Address 3:					Address 3:						
Town:	Lincoln				Town:	Lincoln					
County:					County:						
Country:					Country:						
Postcode:	LN1 2RR				Postcode:	LN2 2RF	₹	7			
2 Doser	intion of th	as Proposal		ノ'							
	•	ne Proposal  posed development, in	cluding any chang	e of u	use:						
Conversion of dwelling into 2 separate flats.											
Has the buil	lding, work or	r change of use already	started?		Yes	✓ No					
·		date when building, d (DD/MM/YYYY):				(date mu	st be pre-appl	ication submission)			
Has the build	ding, work or	change of use been co	•		Yes	✓ No					
·		date when the building, mpleted: (DD/MM/YYY)				(date mus		cation submission)			

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
Unit: House number: 62 House suffix:	authority about this application? Yes No
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: Lindum Avenue	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:
Town: Lincoln	Craig Everton
County:	Reference:
Postcode (optional): LN2 5JB	2023/0362/FUL
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission) 13/07/2023
Easting: 498257 Northing: 371562	Details of pre-application advice received?
Description:	Advised to withdraw previous application
	and re-submit after suitable property marketing period
	]][
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed	Do the plans incorporate areas to store
to or from the public highway? Yes No	and aid the collection of waste? Yes No
Is a new or altered pedestrian access proposed to or from	If Yes, please provide details:
the public highway? Yes No	Bin Storage as per dwg GM12659/PP
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? Yes Vo	
Do the proposals require any diversions	Have arrangements been made
/extinguishments and/or creation of rights of way?	for the separate storage and collection of recyclable waste? Yes No
If you answered Yes to any of the above questions, please show	If Yes, please provide details:
détails on your plans/drawings and state the reference of the plan (s)/drawings(s)	Bin Storage as per dwg GM12659/PP
	]][
Neighbour and Community Consultation	9. Council Employee / Member
Have you consulted your neighbours or	Is the applicant or agent related to
the local community about the proposal?  Yes  No	any member of staff or elected member of the council?
If Yes, please provide details:	If Yes, please provide details:

10. Materials  If applicable, please state what materials are to be used externally. Include type, colour and name for each material:									
п аррпсаме, ріеазе зта	Existing (where ap			Proposed	each mate		Drawing references if applicable		
Walls									
Roof						$\mathbf{x}$			
Windows						x			
Doors					[	x			
Boundary treatments (e.g. fences, walls)					[	<b>x</b>			
Vehicle access and hard-standing					[	x 🗆			
Lighting					اِ	<b>~</b>			
Others (please specify)					ē				
Are you supplying add	Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?  Ves No								
	If Yes, please state references for the plan(s)/drawing(s)/design and access statement:  No changes to external materials								
Design and Access Statement GM12659/DA									
11. Vehicle Parking									
	Please provide information on the existing and proposed number of on-site parking spaces:								
Type of Vehicle		Total Existing		Total proposed (including spaces retained)		Differe in spa			
Cars		0	0						
Light goods vehic public carrier veh	cles/ nicles								
Motorcycles									
Disability spac									
Cycle spaces									
Other (e.g. Bus	s)								

Other (e.g. Bus)

12. Foul Sewage	13. 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 No
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 V 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 plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
prantely as a small grown	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	✓ Main sewer
14. Biodiversity and Geological Conservation	15. Existing Use  Please describe the current use of the site:
Is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or	Residential
on land adjacent to or near the application site?  a) Protected and priority species:	Troside inta
Yes, on the development site	
	Is the site currently vacant?
Yes, on land adjacent to or near the proposed development	If Yes, please describe the last use of the site:
✓ No	Residential
b) Designated sites, important habitats or other biodiversity features:	
Yes, on the development site	When did this use end (if known)?
Yes, on land adjacent to or near the proposed development	(date where known may be approximate)
	Does the proposal involve any of the following:
V No	Land which is known to be contaminated? Yes Vo
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?
V No	If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.
16. Trees and Hedges	17. Trade Effluent
Are there trees or hedges on the	Does the proposal involve the need to
proposed development site? Yes Volume No  And/or: Are there trees or hedges on land adjacent to the	dispose of trade effluents or waste? Yes V No  If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the development or might be important as part of the local landscape character?  Yes V	of trade effluents or waste
If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. 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 construction - Recommendations'.	

Houses Flats and maisonettes Cluster flats Sheltered housing Bedsit/studios Unknown type  Tot  Social Rented Not known Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type  Tot  Tot  Intermediate Houses Flats and maisonettes Unknown type  Intermediate Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type  Tot  Tot  Intermediate Live-work units  Cluster flats Cluster	1 2 1 als (a +	ber of 3  b + c +	4+ d+ e	Unknown	Total  a b c d f A	Market Housing Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type		1 otals	1	3	4+	ooms Unknown + f + g) =	Tota  a b c d e f
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Unknown type  Tot  Social Rented	Num	nber of	Bedr	ooms	A	Bedsit/studios		otals	(a + l)	) + C +	d + e	+ f + g) =	
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Social Rented Not known Houses	Num	nber of	Bedr	ooms		31		otals	(a + L	) + C +	d + e	+ f + g) =	
Houses  Flats and maisonettes  Live-work units  Cluster flats  Sheltered housing  Bedsit/studios  Unknown type  Tot  Intermediate  Houses  Flats and maisonettes  Live-work units					Total				•			<u> </u>	ــــــ
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Live-work units  Cluster flats  Sheltered housing  Bedsit/studios  Unknown type  Tot  Intermediate  Houses  Flats and maisonettes  Live-work units			<del>                                     </del>		а	Houses							а
Cluster flats					b	Flats and maisonettes							b
Sheltered housing  Bedsit/studios  Unknown type  Tot  Intermediate  Houses  Flats and maisonettes  Live-work units		_			С	Live-work units							С
Bedsit/studios					d	Cluster flats							d
Unknown type  Tot  Intermediate  Not known  Houses  Flats and maisonettes  Live-work units					е	Sheltered housing						е	
Intermediate Not known Houses □ Flats and maisonettes □ Live-work units □					f	Bedsit/studios							f
Intermediate Not known Houses  Flats and maisonettes  Live-work units					g	Unknown type							9
Houses	als <i>(a +</i>	b + c +	d + e	(f + f + g) =	В		Te	otals	(a + b	) + C +	d + e	+ f + g) =	F
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					b	Flats and maisonettes							b
Chustan flata					С	Live-work units							С
Cluster flats					d	Cluster flats							d
Sheltered housing					е	Sheltered housing							е
Bedsit/studios					f	Bedsit/studios							f
Unknown type					g	Unknown type							g
	als <i>(a +</i>	b + c +	d + e	(f + f + g) =	C			otals	(a + t	) + C +	d + e	+ f + g) =	G
									•				
Key worker Not		nber of	Bedr	ooms	Total	Key worker	Not			per of	Bedr	ooms	Tota
- KHOWH	1 2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses					а	Houses							а
Flats and maisonettes					b	Flats and maisonettes							b
Live-work units					С	Live-work units							С
Cluster flats					d	Cluster flats							d
Sheltered housing					е	Sheltered housing							е
Bedsit/studios					f	Bedsit/studios							f
Unknown type					g	Unknown type							g
Tot	als <i>(a +</i>	b + c +	d + e	(f + f + g) =	D		T	otals	(a + b	) + C +	d + e	+ f + g) =	Н
Total proposed residentia	al unite	<u> </u>	R + (	(i + D) = 2	$\overline{}$	Total existing	resider	ntial	unite	/F	+ F + 1	G + H) = 1	

	ur proposal involve the lo			•		ace? Yes	<b>7</b> No
If you	u have answered Yes to	he qu	estion above plea	ase add details	in the followi	ng table:	
Us	se class/type of use		Existing gross internal floorspace (square metres)	Gross internal to be lost by use or der (square n	change of molition	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						
А3	Restaurants and cafes						
A4	Drinking establishments						
<b>A</b> 5	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						
	dition, for hotels, residen		stitutions and hos	·			
Use class	Type of use Not applicable	⊏XISI	of use or dem	olition	cha	s proposed (including anges of use)	Net additional rooms
C1	Hotels   Desidential						
	Residential Institutions						
Other	Hostels						
20. Em	ıployment						
	complete the following in	forma	tion regarding em	nployees:			
			Full-time	Part	-time	Total full-time equivalent	Not known
Ex	isting employees						
Pro	posed employees						
21. Ha	urs of Opening						
	se state the hours of ope	nina fa	or each non-reside	ential use prop	osed:		
. 1000			y to Friday	Saturda		Sunday and	Not known
		_		<u> </u>	-	Bank Holidays	
22. Site	e Area						

Please state the site area in hectares (ha) 112 sqm

23. Industrial or Commercial Proce	sses	and Machine	ry			
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed or	cts ind	would cluding e the				
Is the proposal a waste management develo	pmer	nt? Yes	✓ No			
If the answer is Yes, please complete the fol	lowing	g table:				
	0 L 0 C 0 L 0 C 0 C 0 C 0 C 0 C 0 C 0 C	including engin allowance for	acity of the void in eering surcharge cover or restoration d waste or litres if	and making no on material (or	Maximum annual operation throughput in tonnes (or litres if liquid waste)	nal
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	throughput of the	e following waste:	I streams:		
Municipal						
Construction, demolition and e	xcava	tion				
Commercial and industr	ial					
Hazardous						
If this is a landfill application you will need t planning authority should make clear what	o prov inform	vide further infor nation it requires	mation before you on its website.	ır application can	be determined. Your waste	
24. Hazardous Substances						
Does the proposal involve the use or storage the following materials in the quantities state			<b>√</b> No	✓ Not applical	ole	
If Yes, please provide the amount of each su	ıbstan	ce that is involve	d:			
Acrylonitrile (tonnes)	E	thylene oxide (to	nnes)		Phosgene (tonnes)	
Ammonia (tonnes)	Hydro	ogen cyanide (to	nnes)	Sul	phur dioxide (tonnes)	
Bromine (tonnes)	L	iquid oxygen (to	nnes)	]	Flour (tonnes)	
Chlorine (tonnes) Lie	quid p	etroleum gas (to	nnes)	Refined	d white sugar (tonnes)	
Other:			Other:			
Amount (tonnes):			Amount (ton	nes):		

25. Certificates						
One Certificate A, B, C, or D, must				this application form		
Town and Country Pla I certify/The applicant certifies that on towner (owner is a person with a freehold which the application relates.	nning (General D the day 21 days be	efore the date of this appli	Order 1995 Certificate under Accident nobody except myself/th	ne applicant was the		
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):		
				01.12.2023		
	CERTIFICAT	E OF OWNERSHIP - CERT				
Town and Country Plan I certify/ The applicant certifies that I h 21 days before the date of this applicati left to run) of any part of the land or buil	nning (General D ave/the applicant ion, was the owne	<b>Development Procedure)</b> has given the requisite nower (owner is a person with a	Order 1995 Certificate under Aprice to everyone else (as listed	below) who, on the day		
Name of Owner		Address		Date Notice Served		
				_		
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):		
Зідпец - Арріїсані.		Or signed - Agent.				
I certify/ The applicant certifies that:  § Neither Certificate A or B can be iss  § All reasonable steps have been tak interest or leasehold interest with at lease unable to do so.  The steps taken were:	sued for this applic en to find out the r	cation names and addresses of tl	Order 1995 Certificate under Anne other owners (owner is a person, or of a part of it, but I have the	on with a freehold		
Name of Owner		Address		Date Notice Served		
Notice of the application has been pub (circulating in the area where the land i	lished in the follow	wing newspaper	On the following date (which than 21 days before the date	must not be earlier		
(circulating in the area where the fand i	S situateu).		Than 21 days before the date	or the application).		
			] [			
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):		

25. Certificates (continued)				
Town and Country Planning I certify/ The applicant certifies that: \$ Certificate A cannot be issued for this ap \$ All reasonable steps have been taken to this application, was the owner (owner is of the land to which this application relai	g (General Development oplication find out the names and a sa person with a freehold	addresses of everyone else	e who, on the day 21 st with at least 7 years	days before the date of
The steps taken were:				
Notice of the application has been publishe (circulating in the area where the land is situ			following date (which days before the date	
Signed - Applicant:	Or signed	- Agent:		Date (DD/MM/YYYY):
- прризами				
Town and Country Planning Agricultural Land Declaration - You Must Com (A) None of the land to which the applica	<b>(General Developmen</b> oplete Either A or B		Certificate under A	rticle 7
Signed - Applicant:	Or signed	- Agent:		Date (DD/MM/YYYY):
B) I have/ The applicant has given the r before the date of this application, was a teras listed below:	equisite notice to every pant of an agricultural ho	person other than myself/ to blaing on all or part of the l	the applicant who, or land to which this ap	n the day21 days plication relates,
Name of Tenant		Address		Date Notice Served
Signed - Applicant:	Or <mark>signed</mark>	- Agent:		Date (DD/MM/YYYY):
				04.12.23
				04.1Z.Z0
26. Planning Application Requirem				
Please read the following checklist to make sinformation required will result in your application the Local Planning Authority has been subm	cation being deemed inv	valid. It will not be conside	your proposal. Failu ered valid until all inf	ure to submit all ormation required by
3 copies of a completed and dated application	on form:	The correct fee:	and aggree statems	nt.
3 copies of the plan which identifies the land	I to which		and access stateme	
the application relates drawn to an identified scale and showing the direction of North:	,	Certificate (Agricult	pleted, dated Article ural Holdings):	
3 copies of other plans and drawings or info	rmation	3 copies of the com		
necessary to describe the subject of the appl	ication:	Ownership Certificat	e (A, B, C, or D - as a	applicable): $\Box$
27. Declaration				
I/we hereby apply for planning permission/coinformation.	onsent as described in the	his form and the accompa	nying plans/drawing	s and additional
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/Y	YYY):
			01.12.2023	(date cannot be pre-application)

28. Applicant Contact Details		29. Agent Co	ontact Details	
Telephone numbers		Telephone num	bers	
I =	xtension umber:	Country code:  07760  Country code:	National number:  661083  Mobile number (optiona	Extension number:
Country code: Fax number (optional):  Email address (optional):		Country code:  Email address (a	Fax number (optional):	
30. Site Visit				
Can the site be seen from a public road, public footpath, b	oridleway or	other public land	? Ves N	0
If the planning authority needs to make an appointment to out a site visit, whom should they contact? (Please select of	o carry <i>nly one)</i>	Agent		ther (if different from the gent/applicant's details)
If Other has been selected, please provide: Contact name:		Telephone numb	per:	
Email address:				