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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:

### **Durham County Council**

Regeneration and Economic Development Planning Development County Hall Durham DH1 5UL



### **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. Applicant Name and Address |                         |  |  |  |  |  |  |
|-------------------------------|-------------------------|--|--|--|--|--|--|
| Title:                        | Mr First name: Gurpreet |  |  |  |  |  |  |
| Last name:                    | Jagpal                  |  |  |  |  |  |  |
| Company<br>(optional):        | Dartford Students       |  |  |  |  |  |  |
| Unit:                         | House House suffix:     |  |  |  |  |  |  |
| House name:                   | Ashleigh House          |  |  |  |  |  |  |
| Address 1:                    | Ashleigh Gardens        |  |  |  |  |  |  |
| Address 2:                    |                         |  |  |  |  |  |  |
| Address 3:                    |                         |  |  |  |  |  |  |
| Town:                         | Cleadon Village         |  |  |  |  |  |  |
| County:                       |                         |  |  |  |  |  |  |
| Country:                      |                         |  |  |  |  |  |  |
| Postcode:                     | SR6 7PY                 |  |  |  |  |  |  |

| 2. Agent Name and Address |                                |  |  |  |  |  |  |
|---------------------------|--------------------------------|--|--|--|--|--|--|
| Title:                    | Mr First name: Christopher     |  |  |  |  |  |  |
| Last name:                | Donkin                         |  |  |  |  |  |  |
| Company<br>(optional):    |                                |  |  |  |  |  |  |
| Unit:                     | House number: 11 House suffix: |  |  |  |  |  |  |
| House name:               |                                |  |  |  |  |  |  |
| Address 1:                | Tempest Court                  |  |  |  |  |  |  |
| Address 2:                | Wynyard                        |  |  |  |  |  |  |
| Address 3:                |                                |  |  |  |  |  |  |
| Town:                     | Billingham                     |  |  |  |  |  |  |
| County:                   |                                |  |  |  |  |  |  |
| Country:                  |                                |  |  |  |  |  |  |
| Postcode:                 | TS22 5TD                       |  |  |  |  |  |  |

| 3. Description of the Proposal                                                                                                                             |                                                                                                                                    |  |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| Please describe the proposed development, including any change of use:                                                                                     |                                                                                                                                    |  |  |  |  |  |  |
| Convert ground floor office into a 2 person house for student accommodation                                                                                |                                                                                                                                    |  |  |  |  |  |  |
|                                                                                                                                                            |                                                                                                                                    |  |  |  |  |  |  |
| 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 X No                                                                                                                           |  |  |  |  |  |  |
| 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: 44 House suffix:                                                                                                                       | authority about this application?  X 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: Claypath  Address 2:                                                                                                                            | application more efficiently).  Please tick if the full contact details are not known, and then complete as much as possible:      |  |  |  |  |  |  |
| Address 3:                                                                                                                                                 | Officer name:                                                                                                                      |  |  |  |  |  |  |
| Town: Durham                                                                                                                                               | Michelle                                                                                                                           |  |  |  |  |  |  |
|                                                                                                                                                            | Hurton<br>Reference:                                                                                                               |  |  |  |  |  |  |
| Postcode DU4 408                                                                                                                                           | DM/24/00007/                                                                                                                       |  |  |  |  |  |  |
| (optional): DH1 1QS  Description of location or a grid reference. (must be completed if postcode is not known):                                            | FPA Date (DD/MM/YYYY): (must be pre-application submission)                                                                        |  |  |  |  |  |  |
| Easting: Northing:                                                                                                                                         | Details of pre-application advice received?                                                                                        |  |  |  |  |  |  |
| Description:                                                                                                                                               |                                                                                                                                    |  |  |  |  |  |  |
|                                                                                                                                                            | 4 navaan LIMO unaaaantahla                                                                                                         |  |  |  |  |  |  |
|                                                                                                                                                            | 4 person HMO unacceptable New application required to convert into                                                                 |  |  |  |  |  |  |
|                                                                                                                                                            | 2 person accommodation for students                                                                                                |  |  |  |  |  |  |
|                                                                                                                                                            |                                                                                                                                    |  |  |  |  |  |  |
|                                                                                                                                                            |                                                                                                                                    |  |  |  |  |  |  |
|                                                                                                                                                            |                                                                                                                                    |  |  |  |  |  |  |
|                                                                                                                                                            |                                                                                                                                    |  |  |  |  |  |  |

| 6. Pedestrian and Vehicle Access, Road                                                                   | ds and Righ                    | ts of Way             | 7. Waste Storage and Collection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Is a new or altered vehicle access proposed to or from the public highway?                               | Yes                            | X No                  | Do the plans incorporate areas to store and aid the collection of waste?  X Yes  No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Is a new or altered pedestrian access proposed to or from the public highway?                            | Yes                            | X No                  | If Yes, please provide details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Are there any new public roads to be provided within the site?                                           | Yes                            | X No                  | Bin storage in rear garden                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| Are there any new public rights of way to be provided within or adjacent to the site?                    | Yes                            | X No                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Do the proposals require any diversions /extinguishments and/or creation of rights of way?               | Yes                            | X No                  | Have arrangements been made for the separate storage and collection of recyclable waste?  Yes  No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| If you answered Yes to any of the above que details on your plans/drawings and state the (s)/drawings(s) | stions, pleas<br>e reference o | e show<br>of the plan | If Yes, please provide details:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                          |                                |                       | Local Authority Collections                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
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| 8. Authority Employee / Member                                                                           | 111 11                         |                       | and the contract of the contra |
| · · · ·                                                                                                  | enough that                    | a fair-minde          | en and transparent. For the purposes of this question, "related to" led and informed observer, having considered the facts, would e local planning authority.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Do any of the following statements apply to                                                              | you and/or a                   | agent?                | Yes X No With respect to the authority, I am: (a) a member of staff (b) an elected member                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
|                                                                                                          |                                |                       | <ul><li>(c) related to a member of staff</li><li>(d) related to an elected member</li></ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| If Yes, please provide details of their name,                                                            | role and how                   | you are rela          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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| 9. Materials If applicable, please state what materials are to be used externally. Include type, colour and name for each material: |                        |                              |       |                                        |                         |                 |               |
|-------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------|-------|----------------------------------------|-------------------------|-----------------|---------------|
|                                                                                                                                     | Existing<br>(where app |                              |       | Proposed                               |                         | 0 a 2 2 a a a a | Don't<br>Know |
| Walls                                                                                                                               | Brick                  |                              |       | Brick                                  |                         |                 |               |
| Roof                                                                                                                                |                        |                              |       |                                        |                         |                 |               |
| Windows                                                                                                                             | white                  | timber and white upv         | С     | white upvc                             |                         |                 |               |
| Doors                                                                                                                               | Timbe                  | r                            |       | Composite                              |                         |                 |               |
| Boundary treatments (e.g. fences, walls)                                                                                            |                        |                              |       |                                        |                         |                 |               |
| Vehicle access and hard-standing                                                                                                    |                        |                              |       |                                        |                         |                 |               |
| Lighting                                                                                                                            |                        |                              |       |                                        |                         |                 |               |
| Others<br>(please specify)                                                                                                          |                        |                              |       |                                        |                         |                 |               |
|                                                                                                                                     |                        | •                            | _     | /design and access stateme             | ent? Yes                |                 | No            |
|                                                                                                                                     |                        | ne plan(s)/drawing(s)/desigr |       |                                        |                         |                 |               |
| Drawing DC/1 rev A and Heritage statement rev A                                                                                     |                        |                              |       |                                        |                         |                 |               |
| 10. Vehicle Parkin                                                                                                                  | <u> </u>               |                              |       |                                        |                         |                 |               |
|                                                                                                                                     | -                      | he existing and proposed n   |       | · · · · · · · · · · · · · · · · · · ·  |                         |                 |               |
| Type of Vehic                                                                                                                       | :le                    | Total<br>Existing            | Total | I proposed (including spaces retained) | Difference<br>in spaces |                 |               |
| Cars                                                                                                                                |                        | 0                            |       | 0                                      | 0                       |                 |               |
| Light goods vehic<br>public carrier veh                                                                                             | cles/<br>nicles        | 0                            |       | 0                                      | 0                       |                 |               |
| Motorcycles                                                                                                                         | 3                      | 0                            |       | 0                                      | 0                       |                 |               |
| Disability spaces 0                                                                                                                 |                        |                              |       | 0                                      | 0                       |                 |               |

Cycle spaces

Other (e.g. Bus)

Other (e.g. 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                                                                                                                                                                                 | 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                                                                                                                                                                                |  |  |  |  |  |
| 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? X Yes 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 plan(s)/drawing(s):                                                        | Will the proposal increase the flood risk elsewhere?  Yes  X No                                                                                                                         |  |  |  |  |  |
| plant(s)/urawnig(s).                                                                                                                                                                          | How will surface water be disposed of?                                                                                                                                                  |  |  |  |  |  |
| Drawing DC/1                                                                                                                                                                                  | Sustainable drainage system Existing watercourse                                                                                                                                        |  |  |  |  |  |
| revA                                                                                                                                                                                          | Soakaway Pond/lake                                                                                                                                                                      |  |  |  |  |  |
|                                                                                                                                                                                               | X Main sewer                                                                                                                                                                            |  |  |  |  |  |
|                                                                                                                                                                                               |                                                                                                                                                                                         |  |  |  |  |  |
| 13. Biodiversity and Geological Conservation                                                                                                                                                  | 14. Existing Use                                                                                                                                                                        |  |  |  |  |  |
| To assist in answering the following questions refer to the guidance                                                                                                                          | Please describe the current use of the site:                                                                                                                                            |  |  |  |  |  |
| notes for further information on when there is a reasonable likelihood that any important biodiversity or geological                                                                          | Vacant                                                                                                                                                                                  |  |  |  |  |  |
| 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 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:                                                                                                                                                            | Office                                                                                                                                                                                  |  |  |  |  |  |
| Yes, on the development site                                                                                                                                                                  |                                                                                                                                                                                         |  |  |  |  |  |
| Yes, on land adjacent to or near the proposed development                                                                                                                                     | 1/1/1                                                                                                                                                                                   |  |  |  |  |  |
| X No                                                                                                                                                                                          | When did this use end (if known)? DD/MM/YYYY 01/10/2023                                                                                                                                 |  |  |  |  |  |
| b) Designated sites, important habitats or other biodiversity features:                                                                                                                       | (date where known may be approximate)                                                                                                                                                   |  |  |  |  |  |
| 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                                                                                                                                     | Land which is known to be contaminated?                                                                                                                                                 |  |  |  |  |  |
| X 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?  Yes  X No                                                                                                                 |  |  |  |  |  |
| x No                                                                                                                                                                                          | to the presence of contamination.                                                                                                                                                       |  |  |  |  |  |
| 15. Trees and Hedges                                                                                                                                                                          | 16. Trade Effluent                                                                                                                                                                      |  |  |  |  |  |
| Are there trees or hedges on the proposed development site?  Yes X No                                                                                                                         | Does the proposal involve the need to dispose of trade effluents or waste?  Yes  No                                                                                                     |  |  |  |  |  |
| And/or: Are there trees or hedges on land adjacent to the                                                                                                                                     | 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 X No                                                      | of trade effluents or waste                                                                                                                                                             |  |  |  |  |  |
| If Yes to either or both of the above, you may 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                                                                                                                             |                                                                                                                                                                                         |  |  |  |  |  |
| 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 |                                                                                                                                                                                         |  |  |  |  |  |

| 17. Residential Units (Including Conversion)  Does your proposal include the gain, loss or change of use of residential units?  If Yes, please complete details of the changes in the tables below: |              |     |           |         |            |                 |                  | ntial units? X Yes                 |              | lo      |           |              |            |                 |       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-----|-----------|---------|------------|-----------------|------------------|------------------------------------|--------------|---------|-----------|--------------|------------|-----------------|-------|
|                                                                                                                                                                                                     | Propos       | sed | Hous      | sing    |            |                 |                  |                                    | Existi       | ng I    | Hous      | ing          |            |                 |       |
| Market<br>Housing                                                                                                                                                                                   | Not<br>known | 1   | Numb      | er of   | Bedr<br>4+ | ooms<br>Unknown | Total            | Market<br>Housing                  | Not<br>known | 1       | Numb      | per of       |            | ooms<br>Unknown | Total |
| Houses                                                                                                                                                                                              |              |     |           |         |            |                 | а                | Houses                             |              |         |           |              |            |                 | а     |
| Flats/maisonettes                                                                                                                                                                                   |              |     | 1         |         |            |                 | <b>1</b> 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) =                                                                                                                                                                    |              |     |           |         | 1/4        |                 |                  | То                                 | tals (á      | 7 + b + | C + 0     | ' + e + f) = | F          |                 |       |
| Social, Affordable or Intermediate                                                                                                                                                                  | Not<br>known | 1   | Numb      |         |            |                 | Total            | Social, Affordable or Intermediate | Not<br>known |         | Numb      | 1            |            | 1               | Total |
| Rent                                                                                                                                                                                                |              | ı   | 2         | 3       | 4+         | Unknown         |                  | Rent                               | +            | 1       | 2         | 3            | 4+         | Unknown         |       |
| Houses                                                                                                                                                                                              |              |     |           |         |            |                 | a                | Houses Flats/maisonettes           |              |         |           |              |            |                 | a     |
| Flats/maisonettes                                                                                                                                                                                   |              |     |           |         |            |                 | Ь                |                                    |              |         |           |              |            |                 | Ь     |
| Sheltered housing                                                                                                                                                                                   |              |     | -         |         |            |                 | C                | Sheltered housing                  |              |         |           |              |            |                 | C     |
| Bedsit/studios                                                                                                                                                                                      |              |     |           |         |            |                 | d                | Bedsit/studios                     |              |         | 1         |              |            |                 | d     |
| Cluster flats                                                                                                                                                                                       |              |     |           |         |            |                 | е                | Cluster flats                      | $\bot$       |         |           |              |            |                 | е     |
| Other                                                                                                                                                                                               |              | То  | tole (c   |         | 0 1 0      | ' + e + f) =    | 7                | Other                              |              | То      | tole (    | 2 , 6 ,      |            | ( , o , f)      | 7     |
|                                                                                                                                                                                                     |              | 10  |           |         |            |                 | В                | Totals (a + b + c + d + e + f) =   |              |         |           |              | G          |                 |       |
| Affordable Home<br>Ownership                                                                                                                                                                        | Not<br>known | 1   | Numb<br>2 | per of  | Bedr<br>4+ | ooms<br>Unknown | Total            | Affordable Home<br>Ownership       | Not<br>known | 1       | Numb<br>2 | per of       | Bedr<br>4+ | ooms<br>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     |
|                                                                                                                                                                                                     |              | То  | tals (a   | ) + b + | C + 0      | ( + e + f) =    | C                |                                    |              | То      | tals (á   | 7 + b +      | C + 0      | ( + e + f) =    | H     |
| Starter Homes                                                                                                                                                                                       | Not<br>known | 1   | Numb      | per of  | Bedr<br>4+ | ooms<br>Unknown | Total            | Starter Homes                      | Not<br>known | 1       | Numb      | oer of       | Bedr<br>4+ | ooms<br>Unknown | Total |
| Houses                                                                                                                                                                                              |              |     |           |         |            |                 | а                | Houses                             |              |         |           |              |            |                 | а     |
| Flats/maisonettes                                                                                                                                                                                   |              |     |           |         |            |                 | b                | Flats/maisonettes                  |              |         |           |              |            |                 | b     |
| Bedsit/studios                                                                                                                                                                                      |              |     |           |         |            |                 | С                | Bedsit/studios                     |              |         |           |              |            |                 | С     |
| Other                                                                                                                                                                                               |              |     |           |         |            |                 | d                | Other                              |              |         |           |              |            |                 | d     |
|                                                                                                                                                                                                     |              |     | To        | tals (  | (a + b     | + C + d) =      | D                |                                    |              |         | To        | otals (      | (a + b     | + C + d) =      | /     |
| Self Build and<br>Custom Build                                                                                                                                                                      | Not<br>known | 1   | Numb      | per of  | Bedr<br>4+ | ooms<br>Unknown | Total            | Self Build and<br>Custom Build     | Not<br>known | 1       | Numb      | per of       |            | ooms<br>Unknown | Total |
| Houses                                                                                                                                                                                              |              |     |           |         |            |                 | а                | Houses                             |              |         |           |              |            |                 | а     |
| Flats/maisonettes                                                                                                                                                                                   |              |     |           |         |            |                 | b                | Flats/maisonettes                  |              |         |           |              |            |                 | b     |
| Bedsit/studios                                                                                                                                                                                      |              |     |           |         |            |                 | С                | Bedsit/studios                     |              |         |           |              |            |                 | С     |
| Other                                                                                                                                                                                               |              |     |           |         |            |                 | d                | Other                              |              |         |           |              |            |                 | d     |
|                                                                                                                                                                                                     | 1            |     | To        | tals (  | (a + b     | + C + d) =      | E                |                                    | I            |         | To        | tals (       | (a + b     | + C + d) =      | J     |
| Total proposed residential units $(A + B + C + D + E) = 1$                                                                                                                                          |              |     |           |         |            |                 | Total existing r | esidentia                          | al un        | its     | (F + G    | S + H +      | ( / + J) = | 0               |       |

|                   | • .                               | -                      |                           | Non-resident<br>iin or change of u                          | -                                                          |                    | pace? Yes                                                                           | x No                                         |  |
|-------------------|-----------------------------------|------------------------|---------------------------|-------------------------------------------------------------|------------------------------------------------------------|--------------------|-------------------------------------------------------------------------------------|----------------------------------------------|--|
| If you            | ı have answe                      | ered Yes to t          | he qu                     | estion above ple                                            | ase add details                                            | in the follow      | ring table:                                                                         |                                              |  |
| Us                | se class/type                     | of use                 | N o t<br>a p p lic a b lo | Existing gross<br>internal<br>floorspace<br>(square metres) | Gross internal<br>to be lost by<br>use or der<br>(square n | change of nolition | Total gross interna<br>floorspace propose<br>(including change<br>use)(square metre | ed internal floorspace of following developm |  |
| A1                | Sho                               | ops                    |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
|                   | Net trada                         | able area:             |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| A2                | Financ<br>profession              | ial and<br>al services |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| A3                |                                   | s and cafes            |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| A4                | Drinking est                      | ablishments            |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| <b>A</b> 5        | Hot food t                        | akeaways               |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| B1 (a)            | Office (oth                       | er than A2)            |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| B1 (b)            | Resear<br>develo                  |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| B1 (c)            |                                   | dustrial               |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| B2                | General                           | industrial             |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| B8                | Storage or                        | distribution           |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| C1                |                                   | nd halls of<br>lence   |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| C2                |                                   | institutions           |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| D1                |                                   | sidential<br>utions    |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| D2                | institutions Assembly and leisure |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| OTHER             |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| Please<br>Specify |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| Opouny            | То                                | ntal                   |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| In add            | dition, for hot                   | els, resident          | ial ins                   | stitutions and ho                                           | stels, please ad                                           | ditionally inc     | licate the loss or gain                                                             | of rooms                                     |  |
| Class             |                                   | Not applicable         | Exist                     | ing rooms to be l<br>of use or dem                          | lost by change<br>polition                                 | Total room<br>ch   | Net additional room                                                                 |                                              |  |
| C1                | Hotels                            |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
|                   | Residential<br>Institutions       |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| OTHER             |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| Please<br>Specify |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| 19. Em            | ployment                          |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| Please c          | omplete the                       | following inf          | ormat                     | tion regarding er                                           | nployees:                                                  |                    |                                                                                     |                                              |  |
|                   |                                   |                        |                           | Full-time                                                   | Part                                                       | -time              |                                                                                     | Total full-time<br>equivalent                |  |
|                   | isting employ                     |                        |                           |                                                             |                                                            |                    | 0                                                                                   | <u> </u>                                     |  |
| Pro               | Proposed employees 0              |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| 20. Ho            | urs of Ope                        | ning                   |                           | not                                                         | an plicable                                                |                    |                                                                                     |                                              |  |
|                   | <del>-</del>                      | _                      | f oper                    | not<br>ning (e.g. 15:30)                                    | ap plicable<br>for each non-re                             | sidential use      | · · ·                                                                               |                                              |  |
|                   | Use                               | Me                     | onday                     | to Friday                                                   | Saturda                                                    | y                  | Sunday and<br>Bank Holidays                                                         | Not known                                    |  |
|                   |                                   |                        |                           |                                                             |                                                            |                    | ,                                                                                   |                                              |  |
|                   |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
|                   |                                   |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| 21. Site          | e Area                            |                        |                           |                                                             |                                                            |                    |                                                                                     |                                              |  |
| Please st         | ate the site a                    | rea in hectare         | es (ha                    | 225m2                                                       | 0.02251                                                    | na                 |                                                                                     |                                              |  |

| 22. Industrial or Commercial Proces                                                                                                                                                                                             | 22. Industrial or Commercial Processes and Machinery       |                                                                                                                                                   |                                                                             |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|--|--|--|--|
| 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                                                                                                                                                                                       | opment? Yes                                                | X No                                                                                                                                              |                                                                             |  |  |  |  |
|                                                                                                                                                                                                                                 | If the answer is Yes, please complete the following table: |                                                                                                                                                   |                                                                             |  |  |  |  |
|                                                                                                                                                                                                                                 | The total cap including engir allowance for tonnes if sol  | acity of the void in cubic metres,<br>neering surcharge and making no<br>cover or restoration material (or<br>id 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/<br>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 th                                     | ne following waste streams:                                                                                                                       |                                                                             |  |  |  |  |
| Municipal                                                                                                                                                                                                                       |                                                            |                                                                                                                                                   |                                                                             |  |  |  |  |
| Construction, demolition and e                                                                                                                                                                                                  | xcavation                                                  |                                                                                                                                                   |                                                                             |  |  |  |  |
| Commercial and industr                                                                                                                                                                                                          | ial                                                        |                                                                                                                                                   |                                                                             |  |  |  |  |
| Hazardous                                                                                                                                                                                                                       |                                                            |                                                                                                                                                   |                                                                             |  |  |  |  |
| If this is a landfill application you will need to planning authority should make clear what                                                                                                                                    | o provide further infor<br>information it requires         | rmation before your application car<br>s on its website.                                                                                          | n be determined. Your waste                                                 |  |  |  |  |
| 23. Hazardous Substances                                                                                                                                                                                                        |                                                            |                                                                                                                                                   |                                                                             |  |  |  |  |
| Does the proposal involve the use or storage the following materials in the quantities state                                                                                                                                    |                                                            | X No X Not applica                                                                                                                                | ble                                                                         |  |  |  |  |
| If Yes, please provide the amount of each su                                                                                                                                                                                    | bstance that is involve                                    |                                                                                                                                                   |                                                                             |  |  |  |  |
| Acrylonitrile (tonnes)                                                                                                                                                                                                          | Ethylene oxide (to                                         | onnes)                                                                                                                                            | Phosgene (tonnes)                                                           |  |  |  |  |
| Ammonia (tonnes)                                                                                                                                                                                                                | Hydrogen cyanide (to                                       | onnes) Su                                                                                                                                         | Iphur dioxide (tonnes)                                                      |  |  |  |  |
| Bromine (tonnes)                                                                                                                                                                                                                | Liquid oxygen (to                                          | onnes)                                                                                                                                            | Flour (tonnes)                                                              |  |  |  |  |
| Chlorine (tonnes) Lic                                                                                                                                                                                                           | quid petroleum gas (to                                     | onnes) Refine                                                                                                                                     | d white sugar (tonnes)                                                      |  |  |  |  |
| Other:                                                                                                                                                                                                                          |                                                            | Other:                                                                                                                                            |                                                                             |  |  |  |  |
| Amount (tonnes):                                                                                                                                                                                                                |                                                            | 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, Gapplication relates but the land is, or i                                                                                                                                      | C or D, as approp<br>s part of, an agri              | oriate, if you are the sole owner of the la<br>cultural holding.                            | and or building t                         | o which the                                      |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|---------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------|--|
| *"owner" is a person with a freehold intere.<br>**"agricultural holding" has the meaning g                                                                                                                           | st or leasehold inte<br>niven by reference           | erest with at least 7 years left to run.<br>to the definition of "agricultural tenant" in s | rection 65(8) of th                       | e Act.                                           |  |
| Signed - Applicant:                                                                                                                                                                                                  |                                                      | Or signed - Agent:                                                                          |                                           | Date (DD/MM/YYYY):                               |  |
|                                                                                                                                                                                                                      |                                                      | Mill                                                                                        |                                           | 14/02/2024                                       |  |
| I certify/ The applicant certifies that I ha<br>21 days before the date of this application<br>application relates.<br>*"owner" is a person with a freehold interest<br>*"agricultural tenant" has the meaning given | velopment Mana<br>ve/the applicant lon, was the owne | 3) of the Town and Country Planning Act 19                                                  | e else (as listed k<br>art of the land or | pelow) who, on the day<br>building to which this |  |
| Name of Owner / Agricultural Tenant                                                                                                                                                                                  |                                                      | Address                                                                                     |                                           | Date Notice Served                               |  |
|                                                                                                                                                                                                                      |                                                      |                                                                                             |                                           |                                                  |  |
|                                                                                                                                                                                                                      |                                                      |                                                                                             |                                           |                                                  |  |
|                                                                                                                                                                                                                      |                                                      |                                                                                             |                                           |                                                  |  |
|                                                                                                                                                                                                                      |                                                      |                                                                                             |                                           |                                                  |  |
|                                                                                                                                                                                                                      |                                                      |                                                                                             |                                           |                                                  |  |
| Signed - Applicant:                                                                                                                                                                                                  |                                                      | Or signed - Agent:                                                                          |                                           | Date (DD/MM/YYYY):                               |  |
|                                                                                                                                                                                                                      |                                                      | I .                                                                                         |                                           | 1                                                |  |

# 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): Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent: 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 meaning given in section 65(8) of the Town and Country Planning 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 than 21 days before the date of the application): (circulating in the area where the land is situated): Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent:

| 25. Planning Application Requirements - Checklist                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                             |  |  |  |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Please read the following checklist to make sure you have sent all the information required will result in your application being deemed invathe 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                                                                                                                                                                                                                                                                                                                                                                                             | The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):                                    |  |  |  |  |
| and showing the direction of North:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | The original and 3 copies* of a fire statement, if required (see help text and guidance notes for details):                                                 |  |  |  |  |
| The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.                                                                                                                                                                                                                                                                                                                                                                                                | 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 supp                                                                                                                                                                                                                                                                                                                                                                                                                                                      | pliers: https://www.planningportal.co.uk/buyaplanningmap                                                                                                    |  |  |  |  |
| 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:                                                                                                                                                                                                                                                                     |                                                                                                                                                             |  |  |  |  |
| 27. Applicant Contact Details                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 28. Agent Contact Details                                                                                                                                   |  |  |  |  |
| Telephone numbers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Telephone numbers                                                                                                                                           |  |  |  |  |
| Country code: National number: Extension number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Country code: National number: Extension number:                                                                                                            |  |  |  |  |
| Country code: Mobile number (optional):  Country code: Fax number (optional):                                                                                                                                                                                                                                                                                                                                                                                                                                              | Country code: Mobile number (optional):  Country code: Fax number (optional):                                                                               |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                             |  |  |  |  |
| Email address (optional):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Email address (optional):                                                                                                                                   |  |  |  |  |
| 29. Site Visit                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                             |  |  |  |  |
| Can the site be seen from a public road, public footpath, bridleway or o                                                                                                                                                                                                                                                                                                                                                                                                                                                   | other public land? X Yes No                                                                                                                                 |  |  |  |  |
| 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> )                                                                                                                                                                                                                                                                                                                                                                              | Agent Applicant Other (if different from the agent/applicant's details)                                                                                     |  |  |  |  |
| If Other has been selected, please provide:  Contact name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Telephone number:                                                                                                                                           |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                             |  |  |  |  |
| Email address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                             |  |  |  |  |