

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

ISF 2763

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply
Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

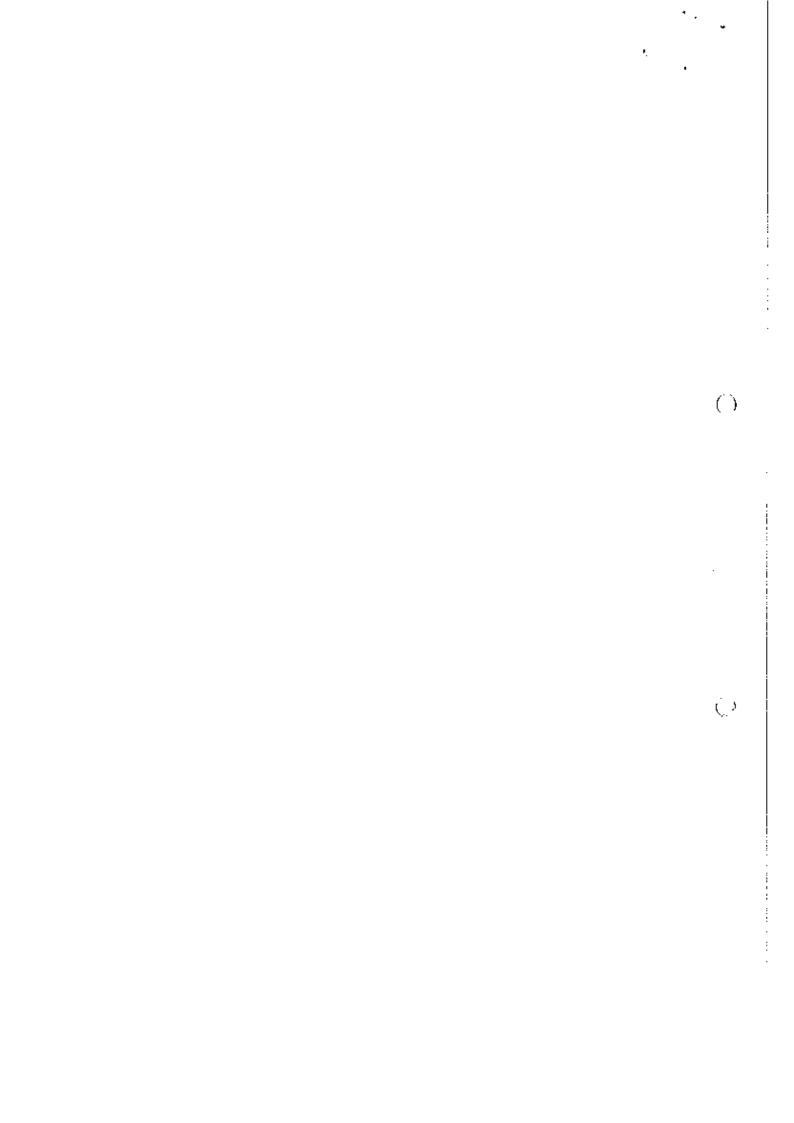
1. Applicant Name and Address	2. Agent Name and Address					
Title: MR First name: DANIEL	Title: MR First name: JAMES					
Last name: BURMAN	Last name: O'ROURKE					
Company (optional):	Company (optional):					
Unit: House number: 22 House suffix:	Unit: House rumber: 14 House suffix:					
House BINNS WAY	House name:					
Address 1: BINNS ROAD IND. EST.	Address 1: HIGH ST					
Address 2:	Address 2:					
Address 3:	Address 3:					
Town:	TOWN: WIAVERTREE					
County:	County:					
Country:	Country:					
Strode: LIB 1EF	Pastcode: LIS 8HF					
3. Description of the Proposal						
LOFT / HWO CONVERSION	<del></del>					
' ' '	RAISING OF REAR OUTRIGGER					
WITH NEW HIPPED ROOF						
FEE PAID - REF - 1	NSZZ00297420					
Has the building, work or change of use already started?	☐ Yes ☑ 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 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)					
	SCabe: 2015-04-02 \$\$ \$Rexisian: 6149 \$					

4. Site Address Detalls	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 66 House suffix:	authority about this application?
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: KENSINGTON	application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town:	
County:	Reference:
Postcode (optional): L785R	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	
	(Î)
	<u> </u>
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste?  No
Is a new or altered pedestrian	العام ال
access proposed to or from the public highway?	
Are there any new public roads to be	
provided within the site?	
Are there any new public rights of way to be provided	
within or adjacent to the site?	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made
creation of rights of way?	for the separate storage and collection of recyclable waste?  Yes No
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
	.
8. Authority Employee / Member	Do any of these statements apply to you? Yes No
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected membe	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(o) related to an elected member (f Yes, please provide details of the name, relationship and role	`

			림						
•	Existing (where applicable)	Proposed	Not applicable						
Walls		TO MATCH EXISTING							
Roof		11							
Windows		11							
Doors		łı							
undary treatments (-g. fences, walls)									
Vehicle access and hard-standing									
Lighting			<b>2</b>						
Others (please specify)									
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?  Yes No									
f Yes, please state refer	ences for the plan(s)/drawing(s)/d	esign and access statement:							
···									
0. Vehicle Parkin	_	· · · · · · · · · · · · · · · · · · ·	· <del>-</del> -						
	Tabal	sed number of on-site parking spaces:  Total proposed (including Differ	'ence						
Type of Vehicl	e Existing	Total proposed (including Differ in spaces retained)							
Cars	rips/								
Light goods vehic public carrier veh	icles								
Motorcycles  Disability space									
Cycle spaces	······································								
Other (e.g. Bus		<del>-                                     </del>							
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 Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere?
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
	<u></u>
13. Biodiversity and Geological Conservation	14. Existing Use Please describe the current use of the site:
To assist in answering the following questions refer to the guidance	COMMERCIAL   RESIDENTIAL
notes for further information on when there is a reasonable likelihood that any important blodiversity or geological	Covolorezero ( Resilibrio IIII
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:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	When did this use and (if known)?
No	DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yés, on land adjacent to or near the proposed development  No	Land which is known to be contaminated? Yes
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable to the presence of contamination?
₩ No	to the presence of contamination
(15 Troop and Hadges	16. Trade Effluent
15. Trees and Hedges Are there trees or hedges on the	Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? Yes Who lif Yes, please describe the nature, volume and means of disposal
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part	of trade effluents or waste
of the local landscape character?  If Yes to either or both of the above, you <u>may</u> need to provide a full	
Tree Survey, at the discretion of your local planning authority. If a	
Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning	
authority should make clear on its website what the survey should contain, in accordance with the current '855837: Trees in relation to it	
design, demolition and construction - Recommendations'.	\$Date: 2015-04-02 45 Shevision: 6149 \$

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Totais $(a+b+c+d+e+f+g) =$							<u> </u>	Total existing							



	18. All Types of Development: Non-residential Floorspace  Description proposal involve the loss gain or change of use of non-residential floorspace? Yes No							
Does your proposal involve the loss, gain or change of use of non-residential floorspace?  If you have answered Yes to the question above please add details in the following table:								
	u have answer e class/type c			Existing gross internal floorspace (square metres)		floorspace hange of olition	Total gross Internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	5ho	ps						<u></u>
	Net trada	ble area:				. <u> </u>		
A2	Financi profession	ial and al services						
А3	Restaurant:	s and cafes						
A4	Drinking esta	ablishments	<b>D</b>				/	
<b>A</b> 5	Hat food t	akeaways						
B1 (a)	Office (other			<u></u>				ļ
B1 (b)	Researd develo	ch and øment					<u></u>	
B1 (c)	Lightin	•			/			
<b>B</b> 2	Ģeneral i	ndustrial						
<b>7</b> 88	Storage or o							
. C1	Hotels an resid							
Ç2	Residential						·	
DI	Non-res Institu	idential utions						
D2		and leisure						
OTHER					<u></u>			
Please Specify								
Бреспу	То	tal						<u> </u>
In ad	dition, for hor	tels, resident	tial in	stitutions and ho	stels, please add	fitionally in	dicate the loss or gain of	rooms
Use class	Type of use	Not applicable	Exist	ing rooms to be of use or dem	lost by change	Total roon cl	ns proposed (including hanges of use)	Net additional rooms
C1	Hotels Residential					<u></u>	<u> </u>	
C2	Institutions							<u> </u>
OTHER .								<u> </u>
Specify				<u></u>				
	ployment		forma	tion regarding e	mployees:	/	/	2
	·····			Full-time		time		tal full-time equivalent
Ex	isting employ	yees	/					
Pro	posed emplo	yees						
20. Ho	urs of Ope	ning						
If known				ning (e.g. 15:30)			Sunday and Bank Holidays	Not known
	Use		ionda	y to Frieday	Saturda	<u>'                                    </u>	Bank Holidays	(100101011)
			/			<del></del>		
					<u> </u>		<del></del>	<u> </u>
=			···			<del></del>	<del></del>	
21. Slt						<del></del>		
Please st	tate the site a	rea in hecta	res (h	a)	- 	<u> </u>	<del></del>	\$0ate; 2015-03-02 #5 \$Revisions 6149 \$

22. Industrial or Commercial Proce	5 <b>5</b> 05	and Machinery			<u> </u>			
Please describe the activities and processes to be carried out on the site and the end produ plant, ventilation or air conditioning. Please i type of machinery which may be installed or	which cts inc include r site:	e the	<del></del>		· ·			
is the proposal a waste management development?								
If the answer is Yes, please complete the following table:								
	Not applicable	The total capacity of Including engineering allowance for cover of tonnes if solid waste	surcharge and ma or restoration mate	iking no   erial (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)			
inert landfill		<u> </u>	<u></u> .					
Non-hazardous landfill					<u></u>			
Hazardous landfill					. <u>.                                   </u>			
Energy from waste incineration								
Other Incineration					<u> </u>			
Landfill gas generation plant		<u> </u>						
Pyrolysis/gasification								
Metal recycling site								
Transfer stations	n		· · · · · ·					
Material recovery/recycling facilities (MRFs)	H			· <del></del>	· · · · · · · · · · · · · · · · · · ·			
Household civic amenity sites	님	<del>-</del> /	· <del></del>					
Open windrow composting	븀		<del></del>		····			
In-vessel composting	片			· · · -	/			
	<del>[  -   </del>	<del>-/</del>	<del>.</del>	_/1				
Anaerobic digestion  Any combined mechanical, biological and/ or thermal treatment (M8T)				_				
Sewage treatment works								
Other treatment					<u></u>			
Recycling facilities construction, demolition and excavation waste			_/					
Storage of waste	<u> </u>	<del></del>		<u> </u>				
Other waste management	<del></del> ↓□				······································			
Other developments					<u> </u>			
Please provide the maximum annual operat	tional:	throughput of the follo	wing waste stream	1\$: 				
Municipal					<u> </u>			
Construction, demolition and		tion	·					
Commercial and indust	trial				<u>.                                    </u>			
Hazardous		14-6-4-1	- h -f	ication	ha determined. Vous wasta			
If this is a landfill application you will need planning authority should make clear what	to pro inforr	vide further information nation it requires on its	n before your appil website.	cation can	be determined, Your waste			
23. Hazardous Substances			/		_			
Does the proposal involve the use or storage the following materials in the quantities sta	e of a	ny of How? Yes	N°N	lot applicat	ole			
if Yes, please provide the amount of each se								
Acrylonitrile (tonnes)	E	thylene oxide (tonnes)			Phosgene (tonnes)			
Ammonia (tonnes)	-	ogen cyanide (tonnes)		Şul	phur dloxide (tonnes)			
Bromine (tonnes)		Liquid oxygen (tonnes)		,	Flour (tonnes)			
Chlorine (tonnes) L	(quid	petroleum gas (tonnes)		Refined	i white sugar (tonnes)			
Other:			Other:	<del>-</del>				
Amount (tonnes):		<i>F</i>	Amount (tonnes):					

## 24, 'Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding\*\* NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. " "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. "" "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Date (DD/MM/YYYY): Signed - Applicant: 3 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner\* and/or agricultural tenant\*\* of any part of the land or building to which this application relates. " "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. "" "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Date Notice Served Name of Owner / Agricultural Tenant Address

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

Town and Country Planning (Devicertify/ The applicant certifies that: Neither Certificate A or B can be lead to the land or building, or of a part of ""owner" is a person with a freehold interes "" agricultural tenant" has the meaning given.	CERTIFICATE OF OWNI relopment Management F ssued for this application aken to find out the names of it, but I have/ the applica to fleasehold interest with a	ERSHIP - CERTIFICATE C Procedure) (England) Ord and addresses of the othe int has been unable to do at least 7 years left to run.	der 2015 Certificate uer owners* and/or agric	· 1			
Name of Owner / Agricultural Tenant		Address		Date Notice Served			
/	/						
	1		´				
Notice of the application has been published	shed in the following news	paper On the	following date (which i days before the date o	must not be earlier of the application):			
(circulating in the area where the land is	situated):	than 21	days before the date of	y the application			
Signed - Applicant:	Or signed	d - Agent:		Date (DD/MM/YYYY):			
Town and Country Planning (Device I certify/ The applicant certifies that:  Certificate A cannot be issued for All reasonable steps have been to date of this application, was the chave/ the applicant has been upant "owner" is a person with a freehold interes "* "agricultural tenant" has the meaning girthe steps taken were:	velopment Management I this application aken to find out the names owner* and/or agricultural able to do so. It or leasehold interest with a	and addresses of everyon tenant** of any part of th	der 2015 Certificate une else who, on the day e land to which this ap	21 days before the			
/				i'			
Notice of the application has been publis (circulating in the area where the land is	hed in the following news situated):	paper On the than 2	following date (which I days before the date	rnust not be earlier of the application):			
				Date (DD/MM/YYYY):			
Signed - Applicant:	Or signed	d - Agent:	<del></del>	Date (Sp)			
		<u> </u>		L			
25. Planning Application Requi Please read the following checklist to ma information required will result in your a the Local Planning Authority has been su	ake sure you have sent all the pplication being deemed h	nvaild. It will not be consi	<sup>7</sup> (A NO	51113113111Cquii cq 5)			
The original and 3 copies of a completed application form:	l and dated	The correct fee: '	WSZZ0029	7420			
The original and 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:  The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details):  The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable)							
The original and 3 copies of other plans information necessary to describe the su	and drawings or ubject of the application: [[	and Article 14 Certi	ficate (Agricultural Holi	unigs):			

26. Declaration		
I/we hereby apply for planning permission/conse information. I/we confirm that, to the best of my, genuine opinions of the person(s) giving them.	ent as described in th Your knowledge, any	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
Signed - Applicant:	-:Or signed - Agent	Date (OD/MM/YYYY):
	Q Q Q	31 / 10 / 15 (date cannot be pre-application)
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: Mobile number (optional):
Country code: Fax number (optional):		Country code: Fax number (optional):
Email address (optional):		Email address (optional):
( ) Site Visit		
Can the site be seen from a public road, public for	otpath, bridleway or	other public land? Yes No
If the planning authority needs to make an appoir out a site visit, whom should they contact? (Please	tment to carry	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:		agent/applicant's details)
Contact name:		Telephone number:
Email address:		

