

Application for Planning Permission. Town and Country Planning Act 1990 16 F | 13 59 24/5)16

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.

1. Applicant Name and Address

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

2. Agent Name and Address

Title:	Dr First name: M	Title:	MN First name: STEVE
Last name:	(SSA	Last name:	CHAMAN MRTRI.
Company (optional):		Company (optional):	DEVALLAN LTD
Unit:	House number: 214. House suffix:	Unit:	House number: House suffix:
House name:		House name:	QUEENS BOCK BUSINESS CONTINE
Address 1:	GREACEM ROAD	Address 1:	Nonfock Stabil.
Address 2:	WINNER	Address 2:	
Address 3:		Address 3:	
Town:	9 NEAT BU	Town:	LIVENPOA:
County:	MENSEYSIDE	County:	Manstyside
Country:	UE.	Country:	ok.
Postcode:	CH49 2PN	Postcode:	U 089
To W	ption of the Proposal cribe the proposed development, including any change of the Town SHI NUMBER BY THE BUSINESS FROM THE ENGINEER STERNESSE	stolu	VOLLONDONT PLATABOVE
Has the buil	ding, work or change of use already started?	Yes	No
	e state the date when building, were started (DD/MM/YYYY):		(date must be pre-application submission)
If Yes, pleas	ding, work or change of use been completed? e state the date when the building, work f use was completed: (DD/MM/YYYY):	Yes	(date must be pre-application submission)
			\$Date:: 2010-09-10 #\$ \$Revision: 2999 \$

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: House suffix:	authority about this application? Yes No
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: Ofting Now UE HUMAN	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: Worloa	
Town: Ushloa. County: Mansarsive:	Reference:
Postcode (optional):	
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:	
·	
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? Yes No	Do the plans incorporate areas to store and aid the collection of waste? Yes No
Is a new or altered pedestrian	If Yes, please provide details:
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? Yes No	
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 (s)/drawings(s)	If Yes, please provide details:
(3)/ drawnigs(s)	
9 Authority Employee / Member	
8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member (c) related to a member of staff	
(d) related to an elected memb	er
If Yes, please provide details of the name, relationship and role	

9. Materials If applicable, please sta	te what ma	terials are to be used externa	ally. Include	type, colour and name for ea	ach material:				
	Existing (where ap	plicable)		Proposed		Not applicable	Don't Know		
Walls	FACIN	19 Paret		FACING BEICK	levoen.				
Roof									
Windows				ulic DAM	Egney.				
Doors				«					
Boundary treatments (e.g. fences, walls)						2			
Vehicle access and hard-standing					,	1			
Lighting									
Others (please specify)									
,)/design and access statemer	nt? Yes	Ĺ	No		
		he plan(s)/drawing(s)/desig	•			. // =			
	SOE DROWING AND DETIGN AND ACCESS STATIONANT ON ATTACHED CO ROM IN DDF FORMAT.								
10. Vehicle Parkin	ıq								
	_	the existing and proposed n	number of o	n-site parking spaces:					
Type of Vehic	:le	Total Existing	Tota	l proposed (including spaces retained)	2				
Cars		0		0 0					
Light goods veh public carrier vel	icles/ hicles					<u>~</u> _			
Motorcycles									
Disability space	ces								
Cycle space	S					_			
Other (e.g. Bu	ıs)					•			
Other (e.g. Bu	15)								

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 \{\bar{\text{No}}
	If Yes, you will need to submit a Flood Risk Assessment to consider
Package treatment plant	the risk to the proposed site.
Are you proposing to connect to the existing drainage system?	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere? Yes No
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Main sewer
	Multi Sewei
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 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 likelihood of the following being affected adversely or conserved	Is the site currently vacant?
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	·
No	When did this use end (if known)?
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)
features:	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on the development site	assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable
No	to the presence of contamination?
15. Trees and Hedges	16. Trade Effluent
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? If 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	of trade effluents or waste
development or might be important as part 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 'BS5837: Trees in relation to	
r contain, in accordance with the culterit 933037. Hees in relation to 1	

17. Residential Un Does your proposal in If Yes, please complete	ntial units? Yes	<u> </u>	No												
1	Existing Housing														
Market Housing	Not known		Numi 2	per of	Bedr 4+	ooms Unknown	Total	Market Housing	Not known	1	Num 2	ber of		ooms Unknown	Tota
Houses		:			,,,			Houses		·	 	1	 		0
Flats and maisonettes			1					Flats and maisonettes			1			-	b
Live-work units			<u> </u>					Live-work units			 -				c
Cluster flats								Cluster flats						-	rij
Sheltered housing								Sheltered housing							6
Bedsit/studios								Bedsit/studios							**
Unknown type			ı					Unknown type						<u> </u>	ý
	<u>, Т</u>	otals	(a + b	+ + +	d + e	+f+g)=	1		T	otals	(a + t) + <i>c</i> +	d+e	$+f+g\rangle =$	E
														<u>-</u> -	
Social Rented	Not		Numl	er of	Bedr	ooms	Total	Social Rented	Not		Num	ber of	Bedr	ooms	Tota
	known	1_	2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses								Houses			-				G
Flats and maisonettes								Flats and maisonettes	_		ļ				b
Live-work units					ļ			Live-work units							6
Cluster flats								Cluster flats			<u> </u>				d
Sheltered housing								Sheltered housing			<u> </u>				P. 2
Bedsit/studios								Bedsit/studios			<u> </u>				f
Unknown type					<u> </u>	. (.)		Unknown type	<u> </u>						9
	T	otals	(a + b	+ (+	d + e	+ f + g) =		Totals $(a+b+c+d+e+f+g) = \int_{-\infty}^{\infty}$					Ē		
	Not		Numl	ner of	Redr	noms	Total		Not		Numi	her of	Redn	ooms	Tota
						Unknown		Intermediate	known	1	2	3	T	Unknown	
Intermediate	known	1	2	3	4+	CHKIIOWII				<u>.</u>		ļ			1
Intermediate Houses		1	2	3	4+	OTRITOWIT		Houses		<u>-</u>		<u> </u>			G.
,	known	1	2	3	4+	OTIKITOWIT		Houses Flats and maisonettes							0 0
Houses	known	1	2	3	4+	OTIKITOWIT					**************************************				
Houses Flats and maisonettes	known	1	2	3	4+	CHRIGWII		Flats and maisonettes							b
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Houses Flats and maisonettes Live-work units Cluster flats	known	1	2	3	4+			Flats and maisonettes Live-work units Cluster flats							b c.
Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing	known	1			4+	OTRIOWI		Flats and maisonettes Live-work units Cluster flats Sheltered housing							b c. d
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Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios	known		(a + b	+c+	d+e	+f+g)=	Total	Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios		otals	Numl	p+c+	Bedro	ooms	b c. d e f g G
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		ered Yes to th		estion above plea	islistah hhs asa			
Us				· · · · · · · · · · · · · · · · · · ·	ise add details i	n the follow	ng table:	
	e class/type	of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by use or den (square m	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	She	ops						25.
	Net trada	able area:						
A2	Financ profession	ial and al services						
A3	Restaurant	s and cafes			·			
A4	Drinking est	ablishments						
A5	Hot food	takeaways						
B1 (a)	1	er than A2)						
B1 (b)		ch and pment						
B1 (c)		dustrial						
B2	General	industrial						
B8	_	distribution						
C1		nd halls of lence		/***			1.00	
C2		institutions						
D1		sidential						. '
D2	institutions Assembly and leisure							
OTHER						:		
Please								
Specify	To	otal						25.
In add	dition, for ho	tels, resident	ial ins	stitutions and hos	stels, please add	ditionally inc	icate the loss or gain of r	ooms
Use class	Type of use	Not applicable	Existi	ng rooms to be l of use or dem	ost by change olition	Total room ch	s proposed (including anges of use)	Net additional rooms
C1	Hotels							·
	Residential Institutions							
OTHER								
Please pecify								
9. Em	ployment							
lease co	mplete the	following inf	ormat	tion regarding en			Tota	al full-time
				Full-time	Part-	time		juivalent
	sting employ							
Pro	posed emplo	yees						
	urs of Ope	_						
Pleas				or each non-resid	_		Sunday and	
	Use			y to Friday	Saturda	у	Bank Holidays	Not known
		ER	-650	ING USE	E 11		И	
	-1-11-7							

Town and Country Planning (Del Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been date of this application, was the of any part of the land to which The steps taken were: Notice of the application has been public (circulating in the area where the land is	CERTIFICATI Evelopment Mana or this application taken to find out to e owner (owner is a this application re is application re is application re	the names and person with a lates, but I have	addresses of ev freehold interest ve/ the applican	nd) Order 2010 Certificate veryone else who, on the da or leasehold interest with at	y 21 days before the least 7 years left to	run) er
Signed - Applicant:		Or signed - Ag	gent:		Date (DD/MM/Y)	/YY):
25. Agricultural Land Declaration Town and Country Planning (Dev Agricu (A) None of the land to which the applic	AGRICUL' relopment Manag Itural Land Declara	gement Proce ation - You Mu	st Complete Eitl	ner A or B	nder Article 12	
Signed - Applicant:	Edition relates is, or	Or signed - Ag			Date (DD/MM/Y)	/YY) <u>:</u>
					-	
(B) I have/ The applicant has given the r before the date of this application, was as listed below:	equisite notice to a tenant of an agri	every person c icultural holdir	other than myse ng on all or part	lf/ the applicant who, on th of the land to which this ap	e day 21 days plication relates,	
Name of Tenant			Address		Date Notice Serv	ed
			····		·	
Signed - Applicant:		Or signed - Ag	gent:		Date (DD/MM/Y)	/YY):
26. Planning Application Requi Please read the following checklist to mainformation required will result in your athe Local Planning Authority has been so	ake sure you have application being o	sent all the inf	ormation in sup	port of your proposal. Failu considered valid until all info	ure to submit all ormation required	by
the Local Flaming Authority has been so The original and 3 copies of a completed application form:	l and dated	F/	The correct fee	:		
application form: The original and 3 copies of the plan wh	ich identifies	Ц	The original an	d 3 copies of a design and a	access statement,	
the land to which the application relates identified scale and showing the direction	drawn to an on of North:		The original an	d 3 copies of the completed tificate (A, B, C, or D - as ap	d, dated	
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 Article 12 Certificate (Agricultural Holdings):						

27. Declaration I/we hereby apply for planning permission/conse information. Signed - Applicant:	ent as described in th Or signed - Agent:	is form and the accompanying plans/drawings and additional Date (DD/MM/YYYY): (date cannot be pre-application)
28. Applicant Contact Details		29. Agent Contact Details
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
30. Site Visit Can the site be seen from a public road, public for lifthe planning authority needs to make an appoint a site visit, whom should they contact? (Please If Other has been selected, please provide: Contact name:	ntment to carry	other public land? Yes No Applicant Other (if different from the agent/applicant's details) Telephone number:
Email address:		