

TYM / 2010 / 0943 / CU

part 1

2010/0943

Grid Ref N2 95074, OS325

Application for Planning Permission.

Town and Country Planning Act 1990

### Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink.

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

### 1. Applicant Name and Address

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

### 2. Agent Name and Address

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

### 3. Description of Proposed Works

Please describe the proposed works:

Has building or works already been carried out or use of land already started?  Yes  No

If Yes, please state the date when building works or use were started (DD/MM/YYYY):  (date must be pre-application submission)

Have the works been completed or change of use already occurred?  Yes  No

If Yes, please state when the works were completed or use occurred (DD/MM/YYYY):  (date must be pre-application submission)

#### 4. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference. (must be completed if postcode is not known):

Easting:  Northing:

Description:

#### 5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

Further to planning application conditions we asked for clarification due to existing Bed+ Breakfast status.

#### 6. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway?  Yes  No  Unknown

Is a new or altered pedestrian access proposed to or from the public highway?  Yes  No  Unknown

Are there any new public roads to be provided within the site?  Yes  No  Unknown

Are there any new public rights of way to be provided within or adjacent to the site?  Yes  No  Unknown

Do the proposals require any diversions /extinguishments and/or creation of rights of way?  Yes  No  Unknown

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)

#### 7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste?  Yes  No  Unknown

If Yes, please provide details:

Have arrangements been made for the separate storage and collection of recyclable waste?  Yes  No  Unknown

If Yes, please provide details:

#### 8. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal?  Yes  No

If Yes please provide details:

MINUTE  
29 NOV 2010

#### 9. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the Council?  Yes  No

If Yes, please provide details:

### 10. Materials

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

	Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
Walls		NYM / 2010 / 0943 / CU	<input type="checkbox"/>	<input type="checkbox"/>	
Roof			<input type="checkbox"/>	<input type="checkbox"/>	
Windows			<input type="checkbox"/>	<input type="checkbox"/>	
Doors			<input type="checkbox"/>	<input type="checkbox"/>	
Boundary treatments (e.g. fences, walls)			<input type="checkbox"/>	<input type="checkbox"/>	
Vehicle access and hard-standing			<input type="checkbox"/>	<input type="checkbox"/>	
Lighting			<input type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)			<input type="checkbox"/>	<input type="checkbox"/>	

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

Yes

No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

### 11. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	6	6	0
Light goods vehicles/ public carrier vehicles	0	0	0
Motorcycles			
Disability spaces			
Cycle spaces			
Other (e.g. Bus)			
Other (e.g. Bus)			

NYMNPA  
 29 NOV 2010

We have ample parking and turning space for 6 cars, that could be used for a various combination of vehicles.

### 12. Foul Sewage

Please state how foul sewage is to be disposed of:

- Mains sewer  Cess pit
- Septic tank  Other
- Package treatment plant  Unknown

NY14

Are you proposing to connect to the existing drainage system?  Yes  No

If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):

already tied into existing sewage system, as recommended by building control officer.

### 13. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the 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.)

Yes  No  
If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?  Yes  No

Will the proposal increase the flood risk elsewhere?  Yes  No  Unknown

How will surface water be disposed of?

- Sustainable drainage system  Existing watercourse
- Soakaway  Pond/lake
- Main sewer  Unknown

### 14. Biodiversity and Geological Conservation

Is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to 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

b) Designated sites, important habitats or other biodiversity features:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

c) Features of geological conservation importance:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development.
- No

### 15. Existing Use

Please describe the current use of the site:

Private dwelling with limited Bed & Breakfast use.

Is the site currently vacant?  Yes  No

If Yes, please describe the last use of the site:

When did this use end (if known)? DD/MM/YYYY

(date where known may be approximate)

N/A

Does the proposal involve any of the following:

Land which is known to be contaminated?  Yes  No

Land where contamination is suspected for all or part of the site?  Yes  No

A proposed use that would be particularly vulnerable to the presence of contamination?  Yes  No

If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.

### 16. Trees and Hedges

Are there trees or hedges on the proposed development site?  N/A  Yes  No

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 the local landscape character?  Yes  No

If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'.

### 17. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste?  Yes  No

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

N/A

**18. 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:

Yes  No  
 NYPL / 2010 / 0 9 4 3 / C U

Proposed Housing							
Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>A</b>

Existing Housing							
Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>F</b>

Social Rented							
Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>B</b>

Social Rented							
Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>F</b>

Intermediate							
Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>C</b>

Intermediate							
Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>G</b>

Key worker							
Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>D</b>

Key worker							
Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a+b+c+d+e+f+g) =</b>							<b>H</b>

**Total existing residential units (A+B+C+D) =**

**Total proposed residential units (E+F+G+H) =**

29 NOV 2010

**Total net gain / loss of residential units**

### 19. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace?  Yes  No

If you have answered Yes to the question above please add details in the following table:

Use class/type of use		Not appl.	Existing gross internal floorspace (square metres)	Gross internal floorspace to be lost by change of use or demolition (square metres)	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Shops	<input type="checkbox"/>			NYM / 2010 / 0	9 4 3 / 0 0
	Net tradable area:	<input type="checkbox"/>				
A2	Financial and professional services	<input type="checkbox"/>				
A3	Restaurants and cafes	<input type="checkbox"/>				
A4	Drinking establishments	<input type="checkbox"/>				
A5	Hot food takeaways	<input type="checkbox"/>				
B1 (a)	Office (other than A2)	<input type="checkbox"/>				
B1 (b)	Research and development	<input type="checkbox"/>				
B1 (c)	Light industrial	<input type="checkbox"/>				
B2	General industrial	<input type="checkbox"/>				
B8	Storage or distribution	<input type="checkbox"/>				
C1	Hotels and halls of residence	<input type="checkbox"/>				
C2	Residential institutions	<input type="checkbox"/>				
D1	Non-residential institutions	<input type="checkbox"/>				
D2	Assembly and leisure	<input type="checkbox"/>				
OTHER	Please specify	<input type="checkbox"/>				
	Bed + Breakfast	<input type="checkbox"/>	letting 3 rooms out of 5 bedrooms			
Total						

In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

Use class	Type of use	Not applicable	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
C1	Hotels	<input type="checkbox"/>			
C2	Residential Institutions	<input type="checkbox"/>			
Other	Hostels	<input type="checkbox"/>			

N/A

### 20. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent	Not known
Existing employees				
Proposed employees				

### 21. Hours of Opening

Please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday	Saturday	Sunday and Bank Holidays	Not known

NYM/NEA  
29 NOV 2010

### 22. Site Area

Please state the site area in hectares (ha)

### 23. 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:

NYM / 2010 / 0 9 4 3 / C U

Is the proposal a waste management development?  Yes  No

If the answer is Yes, Please complete the following table:

	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	Please provide the maximum annual operational throughput of the following waste streams:
Inert landfill	<input type="checkbox"/>	<del>NA</del>	
Non-hazardous landfill	<input type="checkbox"/>		
Hazardous landfill	<input type="checkbox"/>		
Energy from waste incineration	<input type="checkbox"/>		
Other incineration	<input type="checkbox"/>		
Landfill gas generation plant	<input type="checkbox"/>		
Pyrolysis/gasification	<input type="checkbox"/>		
Metal recycling site	<input type="checkbox"/>		
Transfer stations	<input type="checkbox"/>		
Material recovery/recycling facilities (MRFs)	<input type="checkbox"/>		
Household civic amenity sites	<input type="checkbox"/>		
Open windrow composting	<input type="checkbox"/>		
In-vessel composting	<input type="checkbox"/>		
Anaerobic digestion	<input type="checkbox"/>		
Any combined mechanical, biological and/or thermal treatment (MBT)	<input type="checkbox"/>		
Sewage treatment works	<input type="checkbox"/>		
Other treatment	<input type="checkbox"/>		
Recycling facilities construction, demolition and excavation waste	<input type="checkbox"/>		
Storage of waste	<input type="checkbox"/>		
Other waste management	<input type="checkbox"/>		
Other developments	<input type="checkbox"/>		

Please provide the maximum annual operational throughput of the following waste streams:

Municipal	
Construction, demolition and excavation	
Commercial and industrial	
Hazardous	

If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.

### 24. Hazardous Substances

Does the proposal involve the use or storage of any of the following materials in the quantities stated below?  Yes  No  Not applicable

If Yes, please provide the amount of each substance that is involved:

Acrylonitrile (tonnes) <input type="text"/>	Ethylene oxide (tonnes) <input type="text"/>	Phosgene (tonnes) <input type="text"/>
Ammonia (tonnes) <input type="text"/>	Hydrogen cyanide (tonnes) <input type="text"/>	Sulphur dioxide (tonnes) <input type="text"/>
Bromine (tonnes) <input type="text"/>	Liquid oxygen (tonnes) <input type="text"/>	Flour (tonnes) <input type="text"/>
Chlorine (tonnes) <input type="text"/>	Liquid petroleum gas (tonnes) <input type="text"/>	Refined white sugar (tonnes) <input type="text"/>
Other: <input type="text"/>	Other: <input type="text"/>	
Amount (kilograms): <input type="text"/>	Amount (kilograms): <input type="text"/>	

NYM NPA  
29 NOV 2010

**AGRICULTURAL HOLDINGS CERTIFICATE**

**Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7**

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of, an agricultural holding.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):



26.11.2010

B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

Name of Tenant	Address	Date Notice Served

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):




**26. Planning Application Requirements - Checklist**

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

- |  |                                     |   |                                     |
|--|-------------------------------------|---|-------------------------------------|
| 3 copies of a completed and dated application form:  | <input checked="" type="checkbox"/> | The correct fee:  | <input checked="" type="checkbox"/> |
| 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: | <input checked="" type="checkbox"/> | 3 copies of a design and access statement:  | <input checked="" type="checkbox"/> |
| 3 copies of other plans and drawings or information necessary to describe the subject of the application:  | <input checked="" type="checkbox"/> | 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings):         | <input checked="" type="checkbox"/> |
|  |                                     | 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable): | <input checked="" type="checkbox"/> |

**27. Declaration**

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

NYMNP  
29 NOV 2010

26.11.2010

(date cannot be pre-application)



### 28. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

### 29. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):  
MYM / 2010 / 0943 / GU

### 30. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?  Yes  No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

Agent  Applicant  Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

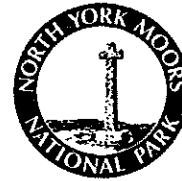
Telephone number:

Email address:

NIYMNPA  
29 NOV 2010

# VALIDATION CHECKLIST

## PLANNING PERMISSION Other than Householder Applications



Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.

### STANDARD REQUIREMENTS

(4 copies to be supplied unless the application is submitted electronically)

<b>Completed application form</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Completed Certificate of Ownership, A, B, C or D as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 and by Regulation 6 of the Planning (Listed Building and Conservation Areas) regulations 1990.</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Location Plan at a scale of 1:2500 or 1:1250 with your application site edged red and any other land in your ownership edged in blue.</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Existing and proposed site layout plans at a scale of 1:100, 1:200 or 1:500</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Existing and proposed elevations to a scale of 1:50 or 1:100</b>	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<b>Existing and proposed floor plans to a scale of 1:50 or 1:100</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Existing and proposed roof plans to a scale of 1:50 or 1:100 – if the proposal alters the existing roof.</b>	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<b>Existing and proposed sections and finished floor levels at a scale of not less than 1:100</b>	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
<b>Design and Access Statement unless material change of use, engineering or mining works</b>	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
<b>Application fee</b> Please consult our enclosed Schedule of Fees. Cheques are to be made payable to NYMNPA.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Manufacturers specification/leaflet, for proposals incorporating plant/machinery (swimming pools/wind turbines)</b> Please highlight the exact information within the leaflet that relates to the development proposal. Please also see the Authority's website for Planning Advice Note 3 – Renewable Energy	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>

**SOME OR ALL OF THE FOLLOWING INFORMATION MAY ALSO BE REQUIRED:**

- |   |   |   |
|---|---|---|
| <b>Biodiversity Survey and Report (Nature Conservation and Ecological Assessment)</b> | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| <b>Flood Risk Assessments/ Sequential Test (flood zones)</b>                          | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| <b>Tree Survey/Arboriculture Assessment</b>   | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| <b>Environmental Impact Assessment</b>  | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| <b>Foul Sewerage/surface water Assessment</b>   | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/>            |
| <b>Structural Survey</b>  | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |
| <b>Statement of Agricultural Need</b>   | YES <input type="checkbox"/>            | N/A <input checked="" type="checkbox"/> |

