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

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 Addison	6
1. Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: First name: J
Last name:	Last name: PATEL
Company (optional): LANGLAND GARDENS LTD.	Company (optional): PROJECT NINE DESIGN LTD
Unit: House House suffix:	Unit: House House suffix:
House name: C/o Agent	House name: ARGTLE HOUSE FIF
Address 1:	Address 1: JOEL STREET
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town: NORTHWOOD HILLS
County:	County: MADAX
Country:	Country:
Postcode:	Postcode: HA6 INIW
3. Description of the Proposal	
Please describe the proposed development, including any change of	of use:
1 Single + part two stoney near explanation	ensian to provide additional
Houspile to existing flats. (As	previously approved).
@ Excavation to lower ground of	on to provide adoquate
headheight to parts of lowe	flas.
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

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House House suffix:	authority about this application?
House	If Yes, please complete the following information about the advice
name:	you were given. (This will help the authority to deal with this
Address 1: LANGUAND GARDENS	application more efficiently).  Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town:	OBOTE HOPE
County:	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:	DISCUSSED BASIEMENT +
	BIA provided
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?
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?	
Do the proposals require any diversions	Have arrangements been made
/extinguishments and/or	for the separate storage and
Creation or rights of way:	collection of recyclable waste?
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:
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 a member of stan	er
If Yes, please provide details of the name, relationship and role	

	Evicting					ole	
	Existing (where applicable)		Proposed			Not applicable	Don's
Walls			See p	les			
Roof			u	~			
Windows			~	L			
Doors			u-	$\sim$			
Boundary treatments e.g. fences, walls)			u.	~			
Vehicle access and nard-standing			ч	<b>\</b>			
Lighting			~	~			
Others (please specify)			~	~			
	itional information on submitte		_	ess statement?	Yes		No
f Yes, please state reie	rences for the plan(s)/drawing(s						
	1						
0. Vehicle Parkin	g rmation on the existing and pro	and number of	er cite parking en	2000			
Type of Vehic	Total		al proposed (inclu spaces retained)	ıding	Difference in spaces		
Cars	Existing		spaces retained)		0		
Light goods veh public carrier vel	icles/						
public currier ver	neres						

0

Disability spaces

Cycle spaces

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)? Yes Vo
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?
plant(s)/ drawning(s).	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
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 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	C3
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?  Yes  No
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the 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)?
	DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:  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? 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 to the presence of contamination?
No	to the presence of contamination:
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site?	Does the proposal involve the need to dispose of trade effluents or waste?  Yes
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal 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	

If Yes, please complet			***************************************			tubics bei									
Proposed Housing							Existing Housing								
Market Housing	Not known	1	Numl 2	per of	Bedre 4+	ooms Unknown	Total	Market Housing	Not known	1	Numb	per of		ooms Unknown	Tota
Houses						O THE TOTAL	a	Houses	П	•			71	OTIKHOWIT	
Flats and maisonettes							10	Flats and maisonettes							-
Live-work units								Live-work units							
Cluster flats								Cluster flats							d
Sheltered housing							7	Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type		-					
The second secon	To	otals	(a+b	+ C+	d+e	+f+g)=			To	otals	(a + b	+ C +	d+e	+f+q)=	
											-				
Social Rented	Not		Numl	per of	Bedr	ooms	Total	Social Rented	Not		Numb	er of	Bedr	ooms	Tota
	known	1	2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses								Houses							111
Flats and maisonettes			1				- 10	Flats and maisonettes							to
Live-work units			-					Live-work units							
Cluster flats							7	Cluster flats							17
Sheltered housing								Sheltered housing							- 3
Bedsit/studios								Bedsit/studios							
Unknown type							-2	Unknown type							37
AND THE RESIDENCE OF THE PARTY	T	otals	(a+t	+ C+	d+e	+f+g)=	16		T	otals	(a + b	+ C+	d+e	+f+g)=	
10000000000000000000000000000000000000						******	T-4-1								I
Intermediate	Not known		Numi 2	per of	Bedr 4+	ooms Unknown	Total	Intermediate	Not known	1	Numl 2	oer of		ooms Unknown	Tota
Houses							0	Houses						- Common - C	q
Flats and maisonettes								Flats and maisonettes							- 5
Live-work units								Live-work units							
Cluster flats							97	Cluster flats							ii
Sheltered housing							8	Sheltered housing							7
Bedsit/studios							7	Bedsit/studios							1
Unknown type							u	Unknown type							
	T	otals	(a + b	) + <i>c</i> +	d+e	+f+g)=			Т	otals	(a+b	+ C +	d+e	(+f+q)=	
Key worker	Not known	1	Num 2	ber of	Bedr 4+	ooms Unknown	Total	Key worker	Not known	1	Numl 2	oer of		ooms Unknown	Tota
Houses							8	Houses							-
Flats and maisonettes	5 🗆						0	Flats and maisonettes							
riats and maisonettes							Ē.	Live-work units							4
Live-work units							8	Cluster flats							
***************************************		1	-	-	-			Sheltered housing							-
Live-work units Cluster flats				1		1	1	II Shelleled Housing						1	
Live-work units			-					Bedsit/studios							
Live-work units Cluster flats Sheltered housing															1

	18. All Types of Development: Non-residential Floorspace  Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No									
	u have answered Yes								110	
	se class/type of use		Existing gross internal floorspace (square metres)			Gross interna to be lost by use or der (square r	l floorspace change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	Shops									
	Net tradable are	a: [								
A2	Financial and professional service	ces [								
A3	Restaurants and ca	afes [								
A4	Drinking establishm	nents [								
A5	Hot food takeawa	ys [						2		
B1 (a)	Office (other than	A2) [				1804 - H. Santana - Francisco				
B1 (b)	Research and development					200				
B1 (c)	Light industrial					***************************************		/		
B2	General industria	al [								
B8	Storage or distribut	tion [						A 100 - 100		
C1	Hotels and halls or residence	of [		144	T					
C2	Residential instituti	ions [	T					****		
D1	Non-residential institutions	I			1	/				
D2	Assembly and leist	ure [			4	747	1.72-1.57/2			
OTHER	•		7							
Please Specify			51							
Specify	Total									
In ad	dition, for hotels, resi	dential	ins	titutions and h	oste	els, please add	ditionally ind	icate the loss or gain of	rooms	
1 1	Type of use   Not applica	Ex		ng rooms to be of use or der	e los	t by change	Total rooms	s proposed (including anges of use)	Net additional rooms	
C1	Hotels									
C2	Residential Institutions									
OTHER										
Please Specify			122 100 000 000						100000000000000000000000000000000000000	
19. Em	ployment									
3	omplete the following	g inforn	nati	on regarding e	emp	loyees:				
	я		**	Full-time		Part-	time		al full-time	
Exi	sting employees			The second secon				equivalent		
Pro	oosed employees			_						
20. Ho	urs of Opening			The second secon						
	, please state the hou	ırs of op	peni	ing (e.g. 15:30)	for	each non-res	idential use r	proposed:		
	Use	O CONTRACTOR OF THE PARTY OF TH		to Friday		Saturday		Sunday and Bank Holidays	Not known	
			10.00					ранк понадуѕ		

22. Industrial or Commercial Processes and Machinery								
Please describe the activities and processes to be carried out on the site and the end produplant, ventilation or air conditioning. Please it type of machinery which may be installed or	cts in	cluding de the						
Is the proposal a waste management development? Yes No								
If the answer is Yes, please complete the following	•••••	<u> </u>						
	Not applicable	<u> </u>	city of the void ir eering surcharge cover or restorati I waste or litres if	Maximum annual operational throughput in tonnes (or litres if liquid waste)				
Inert landfill	Z rg							
Non-hazardous landfill								
Hazardous landfill			A-9-11-11-11-11-11-11-11-11-11-11-11-11-1					
Energy from waste incineration			- 1					
Other incineration								
Landfill gas generation plant								
Pyrolysis/gasification								
Metal recycling site			THE R. P. LEWIS CO., LANSING, MICH.					
Transfer stations		4						
Material recovery/recycling facilities (MRFs)			A CONTRACTOR OF THE CONTRACTOR					
Household civic amenity sites								
Open windrow composting			-1511		10 h 1 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1 h 1			
In-vessel composting								
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment								
Recycling facilities construction, demolition and excavation waste								
Storage of waste								
Other waste management								
Other developments								
Please provide the maximum annual operati	onal	throughput of the	following waste	streams:				
Municipal								
Construction, demolition and e		ation						
Commercial and industr	ial							
Hazardous								
If this is a landfill application you will need to planning authority should make clear what i	o prov inforr	vide further inform nation it requires	nation before yo on its website.	ur application can	be determined. Your waste			
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities state			□No	Not applicab	le			
If Yes, please provide the amount of each sul		5 <del>1</del>						
Acrylonitrile (tonnes)		thylene oxide (tor		]	Phosgene (tonnes)			
Ammonia (tonnes)	Hydr	rogen cyanide (tor	nnes)	Sulp	ohur dioxide (tonnes)			
Bromine (tonnes)	L	Liquid oxygen (tor	ines)	]	Flour (tonnes)			
Chlorine (tonnes) Lic	quid p	petroleum gas (tor	nnes)	Refined	white sugar (tonnes)			
Other:			Other:					

## 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. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 2/5/15 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 Name of Owner / Agricultural Tenant Address **Date Notice Served** Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

24. Ownership Certificates and a  Town and Country Planning (Der  I certify/ The applicant certifies that:	CERTIFICATE OF OWNERSHIP		under Article 14
<ul> <li>Neither Certificate A or B can be</li> <li>All reasonable steps have been t</li> </ul>	aken to find out the names and add of it, but I have/ the applicant has be st or leasehold interest with at least 7 y	rears left to run.	ricultural tenants** of
The steps taken were:			
Name of Owner / Agricultural Tenant	Ado	dress	Date Notice Served
Notice of the application has been publi (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (which than 21 days before the date	h must not be earlier e of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
Certify/ The applicant certifies that:     Certificate A cannot be issued for     All reasonable steps have been to	r this application aken to find out the names and addr owner* and/or agricultural tenant** able to do so. It or leasehold interest with at least 7 vi	e) (England) Order 2015 Certificate  esses of everyone else who, on the da of any part of the land to which this a	y 21 days before the
Notice of the application has been publis (circulating in the area where the land is	shed in the following newspaper situated):	On the following date (which than 21 days before the date	h must not be earlier e of the application):
	NO. 200 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 -		
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
25. Planning Application Requi	rements - Checklist		
Please read the following checklist to ma information required will result in your at the Local Planning Authority has been su	pplication being deemed invalid. It was	ation in support of your proposal. Fail will not be considered valid until all in	ure to submit all formation required by
The original and 3 copies of a completed application form:	and dated The	correct fee:	
The original and 3 copies of the plan whithe land to which the application relates identified scale and showing the directio	ch identifies if re drawn to an	original and 3 copies of a design and quired (see help text and guidance no original and 3 copies of the complete	otes for details):
The original and 3 copies of other plans a	Owi	nership Certificate (A, B, C or D – as ap Article 14 Certificate (Agricultural Ho	plicable)

26. Declaration		
I/we hereby apply for planning permission/consinformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.	ent as described in th /our 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 Agen#	Date (DD/MM/YYYY):
		2/5/15 (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):
		Ginill patel @ hotmail. co. wk.
29. Site Visit		
Can the site be seen from a public road, public fo	ootpath, bridleway o	r other public land? Ves No
If the planning authority needs to make an appo out a site visit, whom should they contact? (Plea:	ointment to carry se select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:		South and I addressed the second of
Contact name:		Telephone number:
Email address:		