If yo	u have answe	ered Yes to the	ne qui	estion above plea	se add details	n the follow	ing table:	
	se class/type			Existing gross internal floorspace (square metres)		floorspace change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following developmen (square metres)
A1	Sh	ops						
	Net trada	able area:						
A2		tial and nal services						
А3		s and cafes						
A4	Drinking est	ablishments						
A5	Hot food	takeaways						
B1 (a)	Office (oth	er than A2)						
B1 (b)		ch and						
B1 (c)		pment dustrial						
B2	-	industrial	ī					
B8		distribution						
C1	Hotels ar	nd halls of						
C2		institutions	H					
D1		sidential						
		utions	1					
D2	Assembly	and leisure	1					
OTHER Please			1					
Specify			П					
	To	tal						
In ad	dition, for ho						licate the loss or gain of r	ooms
Use class	Type of use	Not applicable	Existi	ing rooms to be I of use or dem			s proposed (including anges of use)	Net additional rooms
C1	Hotels							
C2	Residential Institutions							
THER								
Please								
	ployment							
		following inf	ormal	tion regarding en	nnlovoos-			
icase c	ompiete the	Ollowing IIII	Office	Full-time		time		I full-time
Fx	isting employ	VPPS 299V		T GIT TITLE	101		eq	uivalent
	posed emplo							
	urs of Ope	CALLERY						
knowr				ning (e.g. 15:30) f			proposed: Sunday and	
	Use	M	onda	y to Friday	Saturda	У	Bank Holidays	Not known
		2 ()				A STATE OF THE PARTY OF THE PAR		

ase describe the activities and process carried out on the site and the end pro nt, ventilation or air conditioning. Plea: e of machinery which may be installed	ducts including se include the on site:		
he proposal a waste management deve		Yes No	
ne answer is Yes, please complete the f	ollowing table:		
	inclui allo	total capacity of the void in cubic metres, ding engineering surcharge and making no wance for cover or restoration material (or ones if solid waste or litres if liquid waste)	Maximum annual operationa throughput in tonnes (or litres if liquid waste)
Inert landfill			
Non-hazardous landfill	Th		
Hazardous landfill			
Energy from waste incineration			
Other incineration	Til		
Landfill gas generation plant			
Pyrolysis/gasification			
Metal recycling site			
	<u></u>		

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 to owner of any part of the land or building is part of, an agricultural holding**	he day 21 days before the date of this application nobody except myself/ th g to which the application relates, and that none of the land to which the a	e applicant was the pplication relates is, or
NOTE: You should sign Certificate B, C application relates but the land is, or	or D, as appropriate, if you are the sole owner of the land or building to bart of, an agricultural holding.	to which the
" "owner" is a person with a freehold inter "" "agricultural holding" has the meaning	est or leasehold interest with at least 7 years left to run. given by reference to the definition of "agricultural tenant" in section 65(8) of t	he Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
I certify! The applicant certifies that I ha 21 days before the date of this applicati application relates. ""owner" is a person with a freehold inter-	CERTIFICATE OF OWNERSHIP - CERTIFICATE B evelopment Management Procedure) (England) Order 2015 Certificate eve/the applicant has given the requisite notice to everyone else (as listed ion, was the owner* and/or agricultural tenant** of any part of the land o est or leasehold interest with at least 7 years left to run. given in section 65(8) of the Town and Country Planning Act 1990	below) who, on the da
Name of Owner / Agricultural Tenant	Address	Date Notice Served
PINEBANK LID	90 DILLIANS, 619 HOLLOWAY ROAD, LONDON, NI9555	29/10/2015
Signed - Applicant:	Or signed - Agent:	30 / 11/20/5

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 Address Date Notice Served On the following date (which must not be earlier than 21 days before the date of the application): Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 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: On the following date (which must not be earlier than 21 days before the date of the application): Notice of the application has been published in the following newspaper (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 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. HALLICATION MADE THE

The original and 3 copies of a completed and dated application form:

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 other plans and drawings or information necessary to describe the subject of the application:

The original	and 3	copies o	ofa	design	and	access	statemen	t
if required (s								

The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):

X

Signed - Applicant:	em. Or signed - Agent:		Da	te (DD/MM/YYY	Y):
			3	so/11/2015	(date cannot b pre-application
27. Applicant Contact Details		28. Agent Cor	ntact Detail	s	
Telephone numbers		Telephone numb	ers		
Country code: National number:	Extension number:	Country code:	National num	ber:	Extensior number:
Country code: Mobile number (optional)	:	Country code:	Mobile numb	er (optional):	
Country code: Fax number (optional):		Country code:	Fax number (optional):	
Email address (ontional):		Email address (op	otional):		
29. Site Visit					
Can the site be seen from a public road, put If the planning authority needs to make an out a site visit, whom should they contact?	appointment to carry	other public land?	Yes Applican		if different from th
If Other has been selected, please provide:	(Please select only one)	Agent	Applica	" agent/a	applicant's details)
Contact name:		Telephone number	er:		
JOHN PALEOMYLITES					Service of the
Email address:					
Email address:					
Email address:					
Email address:					
Email address:					
Email address:					
Email address:					
Email address:					