HPK/2012/0469

High Peak Borough Council

working for our community

Application for Planning Permission.
Town and Country Planning Act 1990

23 NOV 2012

ublication of planning applications on council websites

ease note that with the exception of applicant contact details and Certificates of Ownership, the information provided on t plication form and in supporting documents may be published on the council's website.

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

ease complete using block capitals and black ink.

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

Applicant Name and Address

tle:	MR
First name:	S & MRS C
st name:	HAYWARD
ompany ptional):	
nit:	
House number:	74
House suffix:	
ouse me:	
ddress 1:	Hall Road
ddress 2:	
ddress 3:	
wn:	ASHTON - U - LYNE
unty:	Lancs
untry:	
stcode:	OL6 8QB

2. Agent Name and Address

Title:	MR
First name:	JOHN
Last name:	FLINN
Company (optional):	DAVENPORT & FLINN Ltd
Unit:	
House number:	3A
House suffix:	
House name:	
Address 1:	HAMNETT STREET
Address 2:	
Address 3:	
Town:	HYDE
County:	Cheshire
Country:	
Postcode:	SK14 2EX

LOCATED

Description of the Proposal

ease describe the proposed development, including any change of use:

ERECTION OF SINGLE DETACHED DWELLING WITH INTEGRAL GARAGE.

HIGH PEAK BOROUGH COUNCIL
POST ROOM
REC'D - 9 AUG 2012

the building, work or change of use already started? ☐ Yes ☒ No

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

he building, work or change of use been completed? ☐ Yes ☒ No

ease provide the full postal address of the application site.

nit: | House number: ? | House suffix:

ouse ame: Land to the rear of 273

~~ddress 1~~: Sheffield Road & fronting

ddress 2: PYRROVE ROAD

ddress 3:

own: GLOSSOP

ounty: Derbs

ostcode ptional): SK13 8QY

escription of location or a grid reference.
nust be completed if postcode is not known):

asting: Northing:

escription:

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: Anne Jordan

Reference: Telephone

Date (DD/MM/YYYY): July '12
(must be pre-application submission)

Details of pre-application advice received?

Due to tree work (unauthorised) this would need to be a new full application. Horse set on same frontage line as OPA.

Pedestrian and Vehicle Access, Roads and Rights of Way

a new or altered vehicle access proposed or from the public highway? ☒ Yes ☐ No

a new or altered pedestrian cess proposed to or from e public highway? ☒ Yes ☐ No

e there any new public roads to be ovided within the site? ☐ Yes ☒ No

e there any new public hts of way to be provided thin or adjacent to the site? ☐ Yes ☒ No

the proposals require any diversions xtinguishments and/or eation of rights of way? ☐ Yes ☒ No

you answered Yes to any of the above questions, please show tails on your plans/drawings and state the reference of the plan /drawings(s)

7. Waste Storage and Collection

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

If Yes, please provide details:

BINS.

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

If Yes, please provide details:

LA Scheme.

Neighbour and Community Consultation

e you consulted your neighbours or local community about the proposal? ☒ Yes ☐ No

es, please provide details:

Mr Hayward has spoken to the Neighbours. June/July '12

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:

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	NA	RECONSTRUCTED STONE COLOUR TO BE APPROVED	☐	☐	
Roof	NA	2nd HAND SLATE	☐	☐	
Windows	NA	UPVC WHITE OR GREY.	☐	☐	
Doors	NA	UPVC WHITE OR GREY	☐	☐	
Boundary treatments e.g. fences, walls)	STONE WALLS [RANDOM]	STONE WALLS North East & West. Fence to South with wall return	☐	☐	
Vehicle access and hard-standing	NA	Tarmac	☐	☐	
Lighting	NA	PIR's	☐	☐	
Others please specify)	NA	Timber stained fence to be stained with side timber gates.	☐	☐	

re you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? ☒ Yes ☐ No

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

DESIGN AND ACCESS STATEMENT.

1. 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	0	2	2
Light goods vehicles/ public carrier vehicles	0	0	0
Motorcycles	0	0	0
Disability spaces	0	0	0
Cycle spaces	0	0	0
Other (e.g. Bus)	0	0	0

lease state how foul sewage is to be disposed of:

- [x] Mains sewer
- [ ] Cess pit
- [ ] Septic tank
- [ ] Other
- [ ] Package treatment plant

e you proposing to
nnect to the existing drainage system? [ ] Yes [ ] No

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

Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 an consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)

[ ] Yes [x] No

If Yes, you will need to submit a Flood Risk Assessment to conside the risk to the proposed site.

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

Will the proposal increase the flood risk elsewhere? [ ] Yes [x] No

How will surface water be disposed of?

- [x] Sustainable drainage system
- [ ] Existing watercours
- [ ] Soakaway
- [ ] Pond/lake
- [ ] Main sewer

4. Biodiversity and Geological Conservation

there a reasonable likelihood of the following being affected
iversely or conserved and enhanced within the application site, or
ı land adjacent to or near the application site?

Protected and priority species:

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

Designated sites, important habitats or other biodiversity
atures:

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

Features of geological conservation importance:

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

15. Existing Use

Please describe the current use of the site:

Building Plot

Is the site currently vacant? [x] Yes [ ] No

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

Garden to 273 Sheffield Road

When did this use end (if known)?
DD/MM/YYYY
(date where known may be approximate) 26/08/2010

Does the proposal involve any of the following:

Land which is known to be contaminated? [ ] Yes [x] No

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

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

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

6. Trees and Hedges

e there trees or hedges on the
oposed development site? [ ] Yes [x] No

nd/or: Are there trees or hedges on land adjacent to the
oposed development site that could influence the
evelopment or might be important as part
the local landscape character? [ ] Yes [x] No

Yes to either or both of the above, you will need to provide a full
ee Survey, with accompanying plan before your application can
e determined. Your Local Planning Authority should make clear

17. Trade Effluent

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

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

oes your proposal include the gain, loss or change of use of residential units? ☐ Yes ☐ No
Yes, please complete details of the changes in the tables below:

Proposed Housing

Market Housing	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
louses	☐				1		1
lats and maisonettes	☐						
ive-work units	☐						
luster flats	☐						
heltered housing	☐						
edsit/studios	☐						
Jnknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							1

Social Rented	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
louses	☐						
lats and maisonettes	☐						
ive-work units	☐						
luster flats	☐						
heltered housing	☐						
edsit/studios	☐						
Jnknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Intermediate	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
louses	☐						
lats and maisonettes	☐						
ive-work units	☐						
luster flats	☐						
heltered housing	☐						
edsit/studios	☐						
nknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Key worker	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
ouses	☐						
ats and maisonettes	☐						
ve-work units	☐						
uster flats	☐						
heltered housing	☐						
edsit/studios	☐						
nknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Total proposed residential units $(A+B+C+D)=$	1

Existing Housing

Market Housing	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Tot
Houses	☐						
Flats and maisonettes	☐						
Live-work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Social Rented	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Tot
Houses	☐						
Flats and maisonettes	☐						
Live-work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Intermediate	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Tot
Houses	☐						
Flats and maisonettes	☐						
Live-work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Key worker	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Tot
Houses	☐						
Flats and maisonettes	☐						
Live-work units	☐						
Cluster flats	☐						
Sheltered housing	☐						
Bedsit/studios	☐						
Unknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							0

Total existing residential units $(E+F+G+H)=$	0

oes 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 applicable	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	☐				
	Net tradable area:	☐				
A2	Financial and professional services	☐				
A3	Restaurants and cafes	☐				
A4	Drinking establishments	☐				
A5	Hot food takeaways	☐				
B1 (a)	Office (other than A2)	☐				
B1 (b)	Research and development	☐				
B1 (c)	Light industrial	☐				
B2	General industrial	☐				
B8	Storage or distribution	☐				
C1	Hotels and halls of residence	☐				
C2	Residential institutions	☐				
D1	Non-residential institutions	☐				
D2	Assembly and leisure	☐				
OTHER	Please specify	☐				
		☐				
	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	☐			
C2	Residential Institutions	☐			
Other	Hostels	☐			

0. Employment

lease complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent
Existing employees			
Proposed employees			

1. 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

2. Site Area

Site area. 0.025 ha

lease describe the activities and processes which would e carried out on the site and the end products including lant, ventilation or air conditioning. Please include the 'pe of machinery which may be installed on site:

: the proposal a waste management development? ☐ Yes ☒ No

'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)	Maximum annual operational throughput in tonnes (or litres if liquid waste)
Inert landfill	☐		
Non-hazardous landfill	☐		
Hazardous landfill	☐		
Energy from waste incineration	☐		
Other incineration	☐		
Landfill gas generation plant	☐		
Pyrolysis/gasification	☐		
Metal recycling site	☐		
Transfer stations	☐		
Material recovery/recycling facilities (MRFs)	☐		
Household civic amenity sites	☐		
Open windrow composting	☐		
In-vessel composting	☐		
Anaerobic digestion	☐		
Any combined mechanical, biological and/ or thermal treatment (MBT)	☐		
Sewage treatment works	☐		
Other treatment	☐		
ecycling facilities construction, demolition and excavation waste	☐		
Storage of waste	☐		
Other waste management	☐		
Other developments	☐		

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

Municipal	
Construction, demolition and excavation	
Commercial and industrial	
Hazardous	

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

4. Hazardous Substances

oes the proposal involve the use or storage of any of he following materials in the quantities stated below? ☐ Yes ☒ No ☐ Not applicable

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

Acrylonitrile (tonnes) ☐

Ammonia (tonnes) ☐

Bromine (tonnes) ☐

Chlorine (tonnes) ☐

Ethylene oxide (tonnes) ☐

Hydrogen cyanide (tonnes) ☐

Liquid oxygen (tonnes) ☐

Liquid petroleum gas (tonnes) ☐

Phosgene (tonnes) ☐

Sulphur dioxide (tonnes) ☐

Flour (tonnes) ☐

Refined white sugar (tonnes) ☐

ther: ☐ Other: ☐

. One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form

CERTIFICATE OF OWNERSHIP - CERTIFICATE A

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

certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the wner *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of any part of the land or building to hich the application relates.

igned - Applicant: [redacted] Date (DD/MM/YYYY 8/8/12

CERTIFICAT

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

certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the da days before the date of this application, was the owner *(owner is a person with a freehold interest or leasehold interest with at least 7 yea ft to run)* of any part of the land or building to which this application relates.

Name of Owner	Address	Date Notice Served

igned - Applicant: Or signed - Agent: Date (DD/MM/YYYY

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

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

ertify/ 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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*)of the land or building, or of a part of it , but I have/ the applicant has been unable to do so.

he steps taken were:

Name of Owner	Address	Date Notice Served

otice of the application has been published in the following newspaper irculating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

igned - Applicant: Or signed - Agent: Date (DD/MM/YYYY

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

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

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 *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run* of any part of the land to which this application relates, but I have/ the applicant has been unable to do so.

he steps taken were:

otice of the application has been published in the following newspaper circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

igned - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY

AGRICULTURAL HOLDINGS CERTIFICATE

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

ricultural 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.

igned - Applicant:

[redacted]

Date (DD/MM/YYYY 8/8/2012

B) I have/ The applicant has given the requisite notice [redacted] who, on the day 21 days efore the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, s listed below:

Name of Tenant	Address	Date Notice Served

gned - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY

. Planning Application Requirements - Checklist

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

e original and 3 copies of a completed and dated plication form: ☒

The correct fee: £335.00 ☒

e original and 3 copies of the plan which identifies land to which the application relates drawn to an ntified scale and showing the direction of North: ☒

The original and 3 copies of a design and access statement: ☒

The original and 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): ☒

e original and 3 copies of other plans and drawings or ormation necessary to describe the subject of the application: ☒

The original and 3 copies of the completed, dated Ownership Certificate (A, ~~B, C, or D~~ - as applicable): ☒

. Declaration

e hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional rmation.

ned - Applicant:

[redacted]

Date (DD/MM/YYYY): 8/8/12

elephone numbers

ountry code: [redacted] Extension number:

ountry code:

ountry code: Fax number (optional): —

mail address (optional): [redacted]

Telephone numbers

Country code: National number: 0161 368 3064 Extensior number:

Country code: Mobile number (optional): 07712 532 128

Country code: Fax number (optional): 0161 367 8821

Email address (optional): flinnbo@hotmail.com

0. Site Visit

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

the planning authority needs to make an appointment to carry ut a site visit, whom should they contact? *(Please select only one)* ☐ Agent ☒ Applicant ☐ Other (if different from th agent/applicant's details)

Other has been selected, please provide:

ontact name: MR. S. HAYWARD Telephone number:

nail address: [redacted]