HPK 2013 0705

# High Peak Borough Council

*working for our community*

HIGH PEAK BOROUGH COUNCIL
19 DEC 2013
£385.00
GLOSSOP RECEIPTS

## Application for Outline Planning Permission with all matters reserved.
## 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 Address

| | |
|---|---|
| Title: | MR. |
| First name: | BRIAN |
| Last name: | HUNT. |
| Company (optional): | |
| Unit: | |
| House number: | |
| House suffix: | |
| House name: | MEADOW LODGE. |
| Address 1: | TUNSTEAD MILTON. |
| Address 2: | WHALEY BRIDGE. |
| Address 3: | |
| Town: | |
| County: | |
| Country: | |
| Postcode: | SK23 7ER. |

### 2. Agent Name and Address

| | |
|---|---|
| Title: | MR. |
| First name: | GRAHAM - |
| Last name: | HADFIELD - |
| Company (optional): | |
| Unit: | |
| House number: | 26 |
| House suffix: | |
| House name: | GAMESLEA HOUSE. |
| Address 1: | GLOSSOP ROAD - |
| Address 2: | HAYFIELD. |
| Address 3: | |
| Town: | |
| County: | |
| Country: | |
| Postcode: | SK22 2NF. |

### 3. Description of the Proposal

Please describe the proposal:

PROPOSED BUNGALOW FOR USE BY MR & MRS B HUNT AT REAR OF MEADOWS LODGE.

HIGH PEAK BOROUGH COUNCIL
POST ROOM
RECD 05 FEB 2014

## 3. Description of the Proposal (continued)

Has building or works already been carried out? ☐ Yes ☑ No

If Yes, please state the date when building or works were started (DD/MM/YYYY):

(date must be pre-application submission)

Have the works been completed? ☐ Yes ☑ No

If Yes, please state when the works were completed (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: AT THE REAR OF

Address 1: MEADOW LODGE.

Address 2: TUNSTEAD MILTON.

Address 3:

Town:

County:

Postcode (optional): SK23 7ER

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

Easting: | Northing:

Description:

## 5. 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.)
ADVISED BY JANE COLLEY AREA IS ZONE 2. ☑ 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

How will surface water be disposed of?

☐ Sustainable drainage system ☑ Existing watercourse

☐ Soakaway ☐ Pond/lake

☑ Main sewer

## 6. 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: JANE COLLEY.

Reference: MEET ON. 25/11/13.

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

Details of pre-application advice received?
I WAS ADVISED OF THE POSSIBLE REASONS FOR THE PLANNING APPLICATION.

## 7. Authority Employee / Member

With respect to the Authority, I am:
(a) a member of staff
(b) an elected member
(c) related to a member of staff
(d) related to an elected member

Do any of these statements apply to you? ☐ Yes ☑ No

If Yes, please provide details of the name, relationship and role

## 8. Site Area

Please state the site area in hectares (ha): 0ha 1,400.00

APPROX. 1,400 M².

## 9. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units? ☑ Yes ☐ No
If 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 |
|---|---|---|---|---|---|---|---|
| Houses (BUNALOW) | ☐ | | | ✓ | | | |
| Flats and maisonettes | ☐ | | | | | | |
| Live-work units | ☐ | | | | | | |
| Cluster flats | ☐ | | | | | | |
| Sheltered housing | ☐ | | | | | | |
| Bedsit/studios | ☐ | | | | | | |
| Unknown type | ☐ | | | | | | |
| **Totals** $(a+b+c+d+e+f+g)=$ | | | | | | | |

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

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

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

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

### Existing Housing

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

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

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

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

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

**TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):** 1

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

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

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) | Unknown | Total gross internal floorspace proposed (including change of use)(square metres) | Unknown | 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 | Unknown | Total rooms proposed (including changes of use) | Unknown | Net additional rooms |
|---|---|---|---|---|---|---|---|
| C1 | Hotels | ☐ | | ☐ | | ☐ | |
| C2 | Residential Institutions | ☐ | | ☐ | | ☐ | |
| OTHER | | ☐ | | ☐ | | ☐ | |
| Please Specify | | ☐ | | ☐ | | ☐ | |

## 11. Employment

N/A.

Please complete the following information regarding employees:

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

## 12. Hours of Opening

N/A.

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

| Use | Monday to Friday | Saturday | Sunday and Bank Holidays | Not known |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |

## 13. 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:

Is the proposal a waste management development? ☐ Yes ☑ No ☐ Unknown

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) | Unknown | Maximum annual operational through put in tonnes (or litres if liquid waste) | Unknown |
|---|---|---|---|---|---|
| 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 | ☐ | | ☐ | | ☐ |
| Recycling facilities construction, demolition and excavation waste | ☐ | | ☐ | | ☐ |
| Storage of waste | ☐ | | ☐ | | ☐ |
| Other waste management | ☐ | | ☐ | | ☐ |
| Other developments | ☐ | | ☐ | | ☐ |

| 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.

## 14. Existing Use

Please describe the current use of the site: USED FOR HAYLAGE ONCE/YR - NOT AGRICULTURAL

Is the site currently vacant? ☑ Yes ☐ No

If Yes, please describe the last use of the site: AS ABOVE -

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

Does the proposal involve any of the following?
If yes, you will need to submit an appropriate contamination assessment with your application.

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

## 15. 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 2010 Certificate under Article 12**

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: | [redacted] e (DD/MM/YYYY): |
|---|---|
| | [redacted] 5/12/2013. |

**CERTIFICATE [redacted]**

**Town and Country Planning (Development Manag[redacted]r Article 12**

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 |
|---|---|---|
| | | |
| | N/A | |
| | | |
| | | |
| | | |

| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY): |
|---|---|---|
| | | |

## 15. Ownership Certificates and Agricultural Land Declaration (continued)

**CERTIFICATE OF OWNERSHIP - CERTIFICATE C**

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12**

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 |
|---|---|---|
| | | |
| | N/A. | |
| | | |
| | | |
| | | |

Notice 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):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

**CERTIFICATE OF OWNERSHIP - CERTIFICATE D**

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12**

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:

N/A.

Notice 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):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

## 16. 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.

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 correct fee: ☐

The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details): ☐

The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 12 Certificate (Agricultural Holdings): ☐

## 17. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Signed - Applicant: [redacted] (DD/MM/YYYY): 5/12/2013 (date cannot be pre-application)

## 18. Applicant Contact Details

Telephone numbers

Country code: [redacted] National number: [redacted] Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

## 19. Agent Contact Details

Telephone numbers

Country code: 01663 National number: 746436. Extension number:

Country code: 07831 Mobile number (optional): 577183.

Country code: Fax number (optional):

Email address (optional): audi3168@hotmail.co.uk

## 20. 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: BRIAN HUNT. Telephone number: AS ABOVE.

Email address: