

Planning Application - part 1



A1. Applicant Details

Organisation	<input type="text" value="3H LLP"/>		
Name	Title	Forename	Surname
	<input type="text" value="Mr"/>	<input type="text" value="Greg"/>	<input type="text" value="Caswill"/>

A1.1 Address Details

Name or flat number	<input type="text"/>
Property number or name	<input type="text" value="The Music Room"/>
Street	<input type="text" value="Tanbridge Park"/>
Town	<input type="text" value="Horsham"/>
Locality	<input type="text"/>
County	<input type="text" value="West Sussex"/>
Postal Town	<input type="text" value="Horsham"/>
Postcode	<input type="text" value="RH12 1SU"/>

A1.2 Communication Details

	Nat Code	Extn No.
Telephone No.	<input type="text" value="01403249331"/>	<input type="text"/>
Daytime Telephone No.	<input type="text" value="01403249331"/>	<input type="text"/>
Fax No.	<input type="text" value="01403249331"/>	<input type="text"/>
Email Address	<input type="text"/>	
DX Number	<input type="text"/>	

A2. Agent Details

Organisation

Michael Cook Associates

Name

Title	Forename	Surname
Mr	Tony	Clark

A2.1 Address Details

Name or flat number

Property number or name

Brooklyn Chambers

Street

11 Goring Road

Town

Worthing

Locality

County

West Sussex

Postal Town

Worthing

Postcode

BN12 4AP

A2.2 Communication Details

Telephone No.

Nat Code	Extn No.
01903248777	

Daytime Telephone No.

01903248777	
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Fax No.

01903248666	
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Email Address

aclark@mcassociates.uk.com

DX Number

1. Site Address Details

1.1 Address Details

Name or flat number	<input type="text"/>
Property number or name	<input type="text" value="Norfolk Hotel/3TO"/>
Street	<input type="text" value="Corner of Chapel Road and Newland Road"/>
Town	<input type="text" value="Worthing"/>
Locality	<input type="text"/>
County	<input type="text" value="West Sussex"/>
Postal Town	<input type="text" value="Worthing"/>
Postcode	<input type="text"/>
UPRN	<input type="text" value="0"/>
Location	<input type="text" value="CORNER OF NEWLAND ROAD AND CHAPEL ROAD WORTHING"/>

2. Description of the Proposed Development

Development Description

CONSTRUCTION OF MIXED USE BUILDING HAVING GROUND FLOOR RETAIL SPACE BELOW SIX FLOORS OF RESIDENTIAL ACCOMODATION - 34 PRIVATE FLATS AND 14 AFFORDABLE - ALL WITH ASSOCIATED EXTERNAL WORKS AND PARKING

3. Type of Application

Type	<input type="checkbox"/> Outline <input type="checkbox"/> Approval of Reserved Matters <input checked="" type="checkbox"/> Full <input type="checkbox"/> Renewal of temporary permission <input type="checkbox"/> Renewal of unexpired permission <input type="checkbox"/> Removal of Condition <input type="checkbox"/> Variation of Condition															
Outline or Reserved Matters Applications	<table border="0"> <tr> <td style="padding-right: 20px;">Siting</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Design</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>External Appearance</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Means of Access</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Landscaping</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>	Siting	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Design	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	External Appearance	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Means of Access	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Landscaping	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Siting	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Design	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
External Appearance	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Means of Access	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Landscaping	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Reference Number of existing application	<input type="text"/>															
Date of previous decision (yyyy-mm-dd)	<input type="text"/>															
Condition Number	<input type="text"/>															

Proposal Type	New building(s)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Alteration or Extension to building(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Change of use	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Demolition	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Other operations	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

4. Access

Is existing access affected?	Pedestrian	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	Vehicular	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Is a new access type proposed?	Pedestrian	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	Vehicular	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Disability Access

PROVISION OF DISABLED PARKING, LEVEL ACCESS TO GROUND FLOOR AND LIFT ACCESS TO UPPER FLOORS

5. Other Information

A. Planting of trees, shrubs or hedges	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
B. Lopping or topping of trees or the removal of trees shrubs or hedges	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
C. Storage of waste	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

6. Public Rights Of Way

Do you propose to alter or divert a Public Right of Way?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the site adjacent to a Public Right Of Way?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Describe the proposed alteration of the Public Right of Way

7. Materials

Walls

SEE MATERIALS LISTED ON ELEVATION DRAWINGS

Roof

SEE MATERIALS LISTED ON ELEVATION DRAWINGS

Site boundaries (fences, walls, etc.), driveways, paved areas and other hard surfaced areas

SEE SITE PLAN

8. Site Area & Floor Space

Site Area

Units square metres
 hectares

Width of site frontage
 metres

Is the application for new building works? Yes No
Please state the existing floorspace of the building
 sq.m

Please state the proposed new floorspace
 sq.m

Is the proposal for a change of use? Yes No
Please state the floorspace related to the change of use
 sq.m

Does the proposal involve the removal or demolition of any part of the existing building? Yes No
Description of removal/demolition

9. Existing Uses

Current use of land or building

If vacant what was the land or building last used for?

10. Residential Information

Select the type of land the development is on

- Brown-field
- Green-field
- Part Greenfield, Part Brownfield
- Don't Know
- Yes No

Is the number of residential units changing?

If Yes, fill out the table below:

	Existing	Proposed	Net Gain
Houses or Bungalows	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Flats/Maisonettes/Apartments	<input type="text" value="0"/>	<input type="text" value="48"/>	<input type="text" value="48"/>
Bedsits	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="Other"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

11. Interest

State the applicant's interest in the land

- Owner
- Lessee
- Prospective purchaser
- Other

If Other give details

Does the applicant own or control any adjoining land?

- Yes No

Has any part of the site been in council ownership?

- Yes No

12. Height

State the height of the new development

 metres

13. Car Parking

Please fill out the car parking space details in the table below:

	Existing	Proposed	Net Gain
Car Spaces	<input type="text" value="24"/>	<input type="text" value="22"/>	<input type="text" value="-2"/>
Goods Vehicle Spaces	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Cycle Spaces	<input type="text" value="0"/>	<input type="text" value="24"/>	<input type="text" value="24"/>
Disability Spaces	<input type="text" value="0"/>	<input type="text" value="2"/>	<input type="text" value="2"/>

14. Drainage

State method of disposal for surface water

TO EXISTING SURFACE WATER SYSTEM

State method of disposal for foul sewage

TO EXISTING FOUL SYSTEM

If septic tanks are used, have the ground conditions been investigated? If "Yes" submit the details with the application Yes No

15. Previous Applications

Any previous known applications for this proposal? Yes No

Reference Number

Date of Application (yyyy-mm-dd)

16. Details

Has the proposal for works or development already been carried out? Yes No

Is the application for any of the following purposes listed below?

- Industry Yes No
- Office Yes No
- Warehousing Yes No
- Storage Yes No
- Shopping Yes No
- Any commercial use involving staff/parking/operating hours Yes No

Planning Application - part 2

17. Industrial Or Commercial Processes and Machinery

Describe processes carried out and the end products

N/A

What type of machinery will be installed?

N/A

18. Related Development

Is the proposal related to any of the following:

An existing use on or nearby the site, or elsewhere

Yes No

If Yes give details

A larger scheme for which planning permission is not yet sought

Yes No

If Yes give details

19. Floorspace

Please complete the floorspace details in m2 in the table below:

	Existing	Lost or removed	Proposed	Total
Shop	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="984"/>	<input type="text" value="984"/>
Professional / Financial services (Bank, Estate Agent, etc)	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Restaurant/Cafe	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Offices	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Industrial	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Warehouse	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Hotel / Hostel / Nursing home	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Other	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="984"/>	<input type="text" value="984"/>

20. Employment

Please complete the employee details table below:

	Full Time	Part Time	Total
Existing Employees	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Proposed Employees	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Total	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

21. Traffic Flow

How many vehicles will visit the site during a normal working day. Please complete the Traffic flow details table below:

	Existing	New	Total
Employees vehicles	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
HGV's	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Other vehicles	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

22. Servicing

What provisions will be made for loading, unloading and turning vehicles within the site?

23. Hours Of Working / Opening

23.1 Working

Please specify the working hours (hh:mm) in the table below:

	Existing		Proposed	
	From	To	From	To
Monday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tuesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wednesday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Thursday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Friday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Saturday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sunday	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

23.2 Opening

Please specify the opening hours (hh:mm) in the table below:

	Existing		Proposed	
	From	To	From	To
Monday	<input type="text"/>	<input type="text"/>	07:30	22:00
Tuesday	<input type="text"/>	<input type="text"/>	07:30	22:00
Wednesday	<input type="text"/>	<input type="text"/>	07:30	22:00
Thursday	<input type="text"/>	<input type="text"/>	07:30	22:00
Friday	<input type="text"/>	<input type="text"/>	07:30	22:00
Saturday	<input type="text"/>	<input type="text"/>	07:30	22:00
Sunday	<input type="text"/>	<input type="text"/>	10:00	16:00

24. Hazardous Substances

Please state the nature, volume and means of disposal of trade effluents or waste

NATURE AND VOLUME UNKNOWN AT THIS TIME. FOR LOCATION OF REFUSE AREAS SEE SITE PLAN

Does the proposal involve the storage of Hazardous Substances? Yes No

If Yes, please specify the hazardous material and the quantity stored in tonnes.

Signature

Certificate A

I certify that:

on the day 21 days before the date of the accompanying application nobody, except the applicant, was the owner of any part of the land to which the application relates.

Signatory

	Title	Forename	Surname
Signatory	<input type="text" value="Mr"/>	<input type="text" value="Tony"/>	<input type="text" value="Clark"/>
Signature	<input style="width: 100%; height: 50px;" type="text"/>		
Date (yyyy-mm-dd)	<input type="text" value="2005-08-12"/>		

Under the provisions of the Planning Acts, if any person issues a certificate which purports to comply with the requirements of this Act and contains a statement which he knows to be false or misleading in a material particular, he shall be guilty of an offence. Please ensure that the information you have provided is accurate.

Agricultural Holdings Certificate

None of the land to which the application relates is, or is part of, an agricultural holding. I have/the applicant has given the requisite notice to every person other than my/him/herself 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 the application relates as follows:

Signatory

	Title	Forename	Surname
Signatory	<input type="text" value="Mr"/>	<input type="text" value="Tony"/>	<input type="text" value="Clark"/>
Signature	<input style="width: 100%; height: 50px;" type="text"/>		
Date (yyyy-mm-dd)	<input type="text" value="2005-08-12"/>		

Under the provisions of the Planning Acts, if any person issues a certificate which purports to comply with the requirements of this Act and contains a statement which he knows to be false or misleading in a material particular, he shall be guilty of an offence. Please ensure that the information you have provided is accurate.
