

Council Offices, Church Walk, Clitheroe, Lancashire, BB7 2RA Tel: 01200 426111 www.niblevalley.gov.uk

For office use only  
Application No. 320120086P

Date received 27/01/2012

Fee paid £

Receipt No:

## Application for Outline Planning Permission With Some Matters Reserved. Town and Country Planning Act 1990

### Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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: | PETER         |
| Last name:          | FINLEY        |             |               |
| Company (optional): |               |             |               |
| Unit:               | House number: | 24          | House suffix: |
| House name:         |               |             |               |
| Address 1:          | KING STREET   |             |               |
| Address 2:          | LONGRIDGE     |             |               |
| Address 3:          |               |             |               |
| Town:               | PRESTON       |             |               |
| County:             | LANCASHIRE    |             |               |
| Country:            | ENGLAND       |             |               |
| Postcode:           | PR3 3RQ       |             |               |

### 2. Agent Name and Address

|                     |                  |             |               |
|---------------------|------------------|-------------|---------------|
| Title:              | MRS              | First name: | MAUREEN       |
| Last name:          | McFADYEN         |             |               |
| Company (optional): |                  |             |               |
| Unit:               | House number:    |             | House suffix: |
| House name:         | STONE BARN HOUSE |             |               |
| Address 1:          | ALSTON LANE      |             |               |
| Address 2:          | LONGRIDGE        |             |               |
| Address 3:          |                  |             |               |
| Town:               | PRESTON          |             |               |
| County:             | LANCASHIRE       |             |               |
| Country:            | ENGLAND          |             |               |
| Postcode:           | PR3 3BN          |             |               |

### 3. Description of the Proposal

Please indicate those reserved matters for which approval is being sought (tick all that apply):

☐ None ☒ Access ☐ Appearance ☐ Landscaping ☒ Layout ☒ Scale

Please describe the proposed work:

DEMOLITION OF EXISTING BUILDING AND  
ERECTOR OF NEW ~~HOUSE~~ TWO STOREY DWELLING HOUSE. PLANS  
SHOWING ACCESS, LAYOUT AND  
OF STREET PARKING.

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 the date 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:

Address 1: OLD MOTOR REPAIR WORKSHOP

Address 2: NEVILLE STREET

Address 3: OF DERBY ROAD

Town: LONGRIDGE PRESTON

County: LANCASHIRE

Postcode (optional): PR3 3FD

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

Easting:  Northing:

Description:

#### 5. 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: GRAEME THORPE

Reference: RV\2011\ENQ\00374

Date (DD/MM/YYYY): 20/09/2011  
(must be pre-application submission)

Details of pre-application advice received:

#### 6. Pedestrian and Vehicle Access, Roads and Rights of Way

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

Is a new or altered pedestrian access proposed to or from the public highway? ☐ Yes ☒ No ☐ Unknown

Are there any new public roads to be provided within the site? ☐ Yes ☒ No ☐ Unknown

Are there any new public rights of way to be provided within or adjacent to the site? ☐ Yes ☒ No ☐ Unknown

Do the proposals require any diversions / extinguishments and/or creation of rights of way? ☐ Yes ☒ No ☐ Unknown

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)/drawing(s):

#### 7. Waste Storage and Collection

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

If Yes, please provide details: TO BE AGREED WITH PLANNERS

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

If Yes, please provide details: TO BE AGREED WITH PLANNERS

#### 8. Neighbour and Community Consultation

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

If Yes, please provide details:

#### 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:

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**10. Materials**

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

|                                             | Existing<br>(where applicable) | Proposed   | Not<br>applicable                   | Don't<br>Know            | Drawing<br>references if<br>applicable |
|---------------------------------------------|--------------------------------|------------|-------------------------------------|--------------------------|----------------------------------------|
| Walls                                       |                                | BRICK WORK | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |
| Roof                                        |                                | TILES      | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |
| Windows                                     |                                | UPVC       | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |
| Doors                                       |                                | UPVC       | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |
| Boundary treatments<br>(e.g. fences, walls) |                                |            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Vehicle access and<br>hard-standing         |                                | PAVING     | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |
| Lighting                                    |                                |            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Others<br>(please specify)                  |                                |            | <input type="checkbox"/>            | <input type="checkbox"/> |                                        |

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

☐ Yes☒ No

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

**11. Vehicle Parking**

Please provide information on the existing and proposed number of on-site parking spaces:

| Type of Vehicle                                  | Total<br>Existing | Total proposed (including<br>spaces retained) | Unknown total proposed<br>(including spaces retained) | Difference<br>in spaces |
|--------------------------------------------------|-------------------|-----------------------------------------------|-------------------------------------------------------|-------------------------|
| Cars                                             | 1                 | 1                                             | <input type="checkbox"/>                              | 0                       |
| Light goods vehicles/<br>public carrier vehicles | N/A               |                                               | <input type="checkbox"/>                              |                         |
| Motorcycles                                      | N/A               |                                               | <input type="checkbox"/>                              |                         |
| Disability spaces                                | N/A               |                                               | <input type="checkbox"/>                              |                         |
| Cycle spaces                                     | N/A               |                                               | <input type="checkbox"/>                              |                         |
| Other (e.g. Bus)                                 | N/A               |                                               | <input type="checkbox"/>                              |                         |
| Other (e.g. Bus)                                 | N/A               |                                               | <input type="checkbox"/>                              |                         |

**12. Foul Sewage**

Please state how foul sewage is to be disposed of:

- ☒ Mains sewer ☐ Cess pit  
☐ Septic tank ☐ Other  
☐ Package treatment plant ☐ Unknown

Are you proposing to connect to the existing drainage system? ☐ Unknown ☒ Yes ☐ No

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

**TO BE AGREED WITH PLANNERS.  
EXISTING TOILET ON SITE.**

**13. 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.)

☐ 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 ☐ Unknown

How will surface water be disposed of?

- ☐ Sustainable drainage system ☒ Existing watercourse  
☐ Soakaway ☐ Pond/lake  
☐ Main sewer ☐ Unknown

**14. Biodiversity and Geological Conservation**

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

a) Protected and priority species:

- ☐ Yes, on the development site  
☐ Yes, on land adjacent to or near the proposed development  
☒ No

b) Designated sites, important habitats or other biodiversity features:

- ☐ Yes, on the development site  
☐ Yes, on land adjacent to or near the proposed development  
☒ No

c) Features of geological conservation importance:

- ☐ Yes, on the development site  
☐ Yes, on land adjacent to or near the proposed development  
☒ No

**15. Existing Use**

Please describe the current use of the site:

**DIS USED BUILDING**

Is the site currently vacant?

☒ Yes ☐ No

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

**AUTO ELECTRICIAN**When did this use end (if known)?  
(DD/MM/YYYY)  
(date where known may be approximate)**10/08/2011**

Does the proposal involve any of the following:

Land which is known to be contaminated? ☐ Yes ☒ NoLand where contamination is suspected for all or part of the site? ☐ Yes ☒ NoA proposed use that would be particularly vulnerable to the presence of contamination? ☐ Yes ☒ No

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

**16. Trees and Hedges**

Are there trees or hedges on the proposed development site?

☐ Yes ☒ No

And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character?

☐ Yes ☒ No

If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'.

**17. Trade Effluent**

Does the proposal involve the need to dispose of trade effluents or waste?

☐ Yes ☒ No

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

Does your proposal include a legal right to occupy?  
If Yes, please complete details of the changes in the tables below:

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

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

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

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

|                                                    |  |
|----------------------------------------------------|--|
| Total proposed residential units (A + B + C + D) = |  |
| 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 |
|------------------------------------------------------------------------------------------------------------|---|

**19. 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                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Shops                               | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Net tradable area:                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| A2                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Financial and professional services | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| A3                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Restaurants and cafes               | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| A4                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Drinking establishments             | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| A5                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Hot food takeaways                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| B1 (a)                              | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Office (other than A2)              | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| B1 (b)                              | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Research and development            | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| B1 (c)                              | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Light industrial                    | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| B2                                  | <input type="checkbox"/> | 110 sq mts                                         | 110 sq mts                                                                          | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| General industrial                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| B8                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Storage or distribution             | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| C1                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Hotels and halls of residence       | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| C2                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Residential institutions            | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| D1                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Non-residential institutions        | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| D2                                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Assembly and leisure                | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| OTHER                               | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| Please specify                      | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
|                                     | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                    | <input type="checkbox"/> |                                                                                |
| 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                   | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |
| C2        | Residential Institutions | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |
| Other     | Hostels                  | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |

**20. Employment**

Please complete the following information regarding employees:

|                    | Full-time | Part-time | Total full-time equivalent | Not known |
|--------------------|-----------|-----------|----------------------------|-----------|
| Existing employees | N/A       |           |                            |           |
| Proposed employees | N/A       |           |                            |           |

**21. 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 |
|-----|------------------|----------|--------------------------|-----------|
| N/A |                  |          |                          |           |
|     |                  |          |                          |           |
|     |                  |          |                          |           |

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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:

N/A

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

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

## 24. Hazardous Substances

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

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

|                        |                               |                              |
|------------------------|-------------------------------|------------------------------|
| Acrylonitrile (tonnes) | Ethylene oxide (tonnes)       | Phosgene (tonnes)            |
| Ammonia (tonnes)       | Hydrogen cyanide (tonnes)     | Sulphur dioxide (tonnes)     |
| Bromine (tonnes)       | Liquid oxygen (tonnes)        | Flour (tonnes)               |
| Chlorine (tonnes)      | Liquid petroleum gas (tonnes) | Refined white sugar (tonnes) |

Other:

Other:

Amount (tonnes):

Amount (tonnes):

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**25. Certificates**

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

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 (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 which the application relates.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):



**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

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

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 (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 which this application relates.

| Name of Owner    | Address                                                       | Date Notice Served |
|------------------|---------------------------------------------------------------|--------------------|
| MAUREEN MCFADYEN | STONE BARN HOUSE,<br>ALSTON LANE, LONGRIDGE, PRESTON, PR3 3BN |                    |
| PETER FINLEY     | 24, KING STREET,<br>LONGRIDGE, PRESTON PR3 3RQ                |                    |
| JAMES JEWITT     | 5, YEW TREE GROVE,<br>LOSTOCK HALL, PRESTON, PR5 5NP          |                    |
|                  |                                                               |                    |
|                  |                                                               |                    |

Signed - 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

I certify/ The applicant certifies that:

S Neither Certificate A or B can be issued for this application

S 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.

The steps taken were:

| Name of Owner | Address | Date Notice Served |
|---------------|---------|--------------------|
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |

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 (General Development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that:

S Certificate A cannot be issued for this application

S 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.

The steps taken were:

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):

3/11/12

**AGRICULTURAL HOLDINGS CERTIFICATE**

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

Agricultural 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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

3/11/12

B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant 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 this application relates, as listed below:

| Name of Tenant | Address | Date Notice Served |
|----------------|---------|--------------------|
|                |         |                    |
|                |         |                    |
|                |         |                    |
|                |         |                    |
|                |         |                    |
|                |         |                    |

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

3/11/12

**26. 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.

A completed and dated application form with 3 copies: ☐The correct fee: ☐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: ☐3 copies of a design and access statement: ☐3 copies of other plans and drawings or information necessary to describe the subject of the application: ☐3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): ☐3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable): ☐**27. Declaration**

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

23/11/2011

(date cannot be pre-application)

320120086 P

**28. Applicant Contact Details**

Telephone numbers

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| Country code:        | National number:     | Extension number:    |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

|                      |                           |
|----------------------|---------------------------|
| Country code:        | Mobile number (optional): |
| <input type="text"/> | <input type="text"/>      |

|                      |                        |
|----------------------|------------------------|
| Country code:        | Fax number (optional): |
| <input type="text"/> | <input type="text"/>   |

Email address (optional):

**29. Agent Contact Details**

Telephone numbers

|                                    |                                     |                      |
|------------------------------------|-------------------------------------|----------------------|
| Country code:                      | National number:                    | Extension number:    |
| <input type="text" value="01772"/> | <input type="text" value="783638"/> | <input type="text"/> |

|                      |                           |
|----------------------|---------------------------|
| Country code:        | Mobile number (optional): |
| <input type="text"/> | <input type="text"/>      |

|                      |                        |
|----------------------|------------------------|
| Country code:        | Fax number (optional): |
| <input type="text"/> | <input type="text"/>   |

Email address (optional):

**30. Site Visit**Can the site be seen from a public road, public footpath, bridleway or other public land? ☒ Yes ☐ NoIf 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:

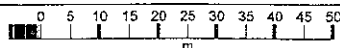
Contact name: Telephone number: Email address:



320120086P



AREA TO BE DEMOLISHED



Neville Street, Longridge  
Location Plan  
Scale 1:1250

Stone Barn House,

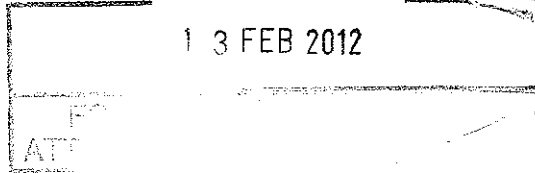
Alston Lane,

Longridge,

Preston. PR3 3BN

9.2.12

1 3 FEB 2012



Dear Louise,

**Demolition of existing building and erection of  
two- storey dwelling house at Old Motor Repair  
Workshop, Neville Street, Longridge, Preston.**

We received your letter dated 7<sup>th</sup> Feb.2012, requiring further information concerning the planning application – Your Ref. 3/2012/0086/invalid.

We have completed part 3 of the application for outline planning as requested.

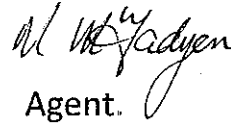
In relation to policy EMP 11 of the Ribble Valley District-wide local plan. We enclose a letter from Dewhurst Homes, whom we approached as to the letting of the existing workshop, as far back as November 2011. Since then, we have had a visit from the rates officer, Warren Lomas from Red Rose House, Lancaster Road, Preston, with the view that, because the building is in such disrepair, it is no longer liable for Rates. He is currently in the process of forwarding the information to R.V.B.C. Rates Department.

We do not think that the proposed house should be larger than planned and recommend the retention of the off road parking area to the right of the dwelling and 1 metre wide access to the left hand side of the property to allow maintenance.

Finally, we enclose photographic evidence of the roof structure, which is Northern Light Construction, with boarded and mineral felt covering to the remaining roof areas. The whole roof covering is in a very bad state of repair, as witnessed by Warren Lomas, the rates officer and the Estate Agent. These

reports justified our need to re-develop the site. Supporting one beam is a large bracket we had made to make it safe temporarily.

Yours sincerely

  
Agent.

# Dewhurst Homes

17<sup>th</sup> November 2011

Mrs McFadyen  
Stone Barn House  
Alston Lane  
Alston  
Preston  
PR3 3BH

Dear Mrs McFadyen,

RE: Empty unit, Neville Street, Longridge formerly used as an Auto Electricians

With reference to the above property, this building is in so much disrepair that it is unsafe to re-let as the roof could fall in at any time.

My recommendations are to take down the old unit and apply for change of use, i.e. a small bungalow, as there is no demand for small units in this climate

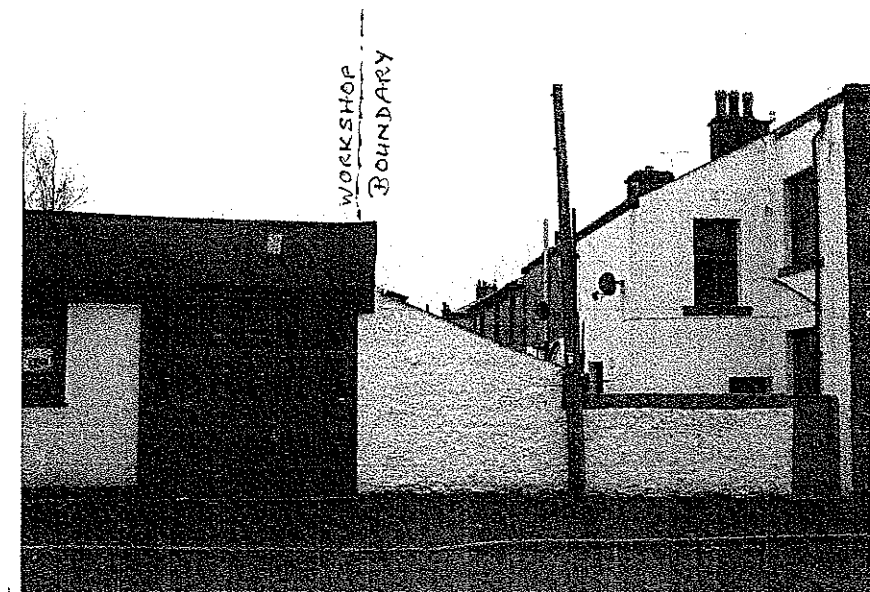
We put three new units up to let at the rear of 90 Berry Lane and we have had no interest in them at all.

If you have any queries, or wish to discuss this further, please do not hesitate to contact me.

Kind Regards

Chris Dewhurst

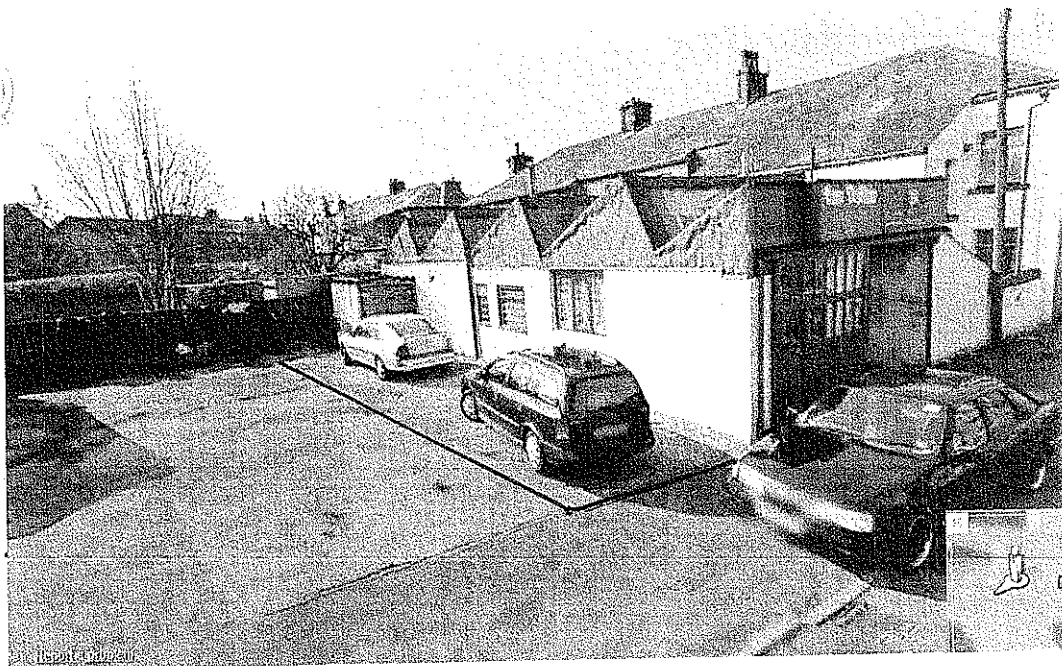
13 FEB 2012



3/2012/0086

## Northern Light Construction

With boarded and mineral felt covering  
to the remaining roof area



NEVILLE ST. LONGRIDGE

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# Design and Access Statement

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For a proposed residential development on  
Neville Street, Longridge

320120086 P

Date: January 2012

## **1 Purpose of the Statement**

- 1.1 This statement has been prepared in respect of the proposed residential development on Neville Street, Longridge.
- 1.2 The statement presented is to supplement the planning application in respect of the aforementioned site and to explain 'the design principles and concepts that have been applied to the proposed development'.

## **2 Amount and Use**

- 2.1 The proposal provides a single residential unit. Consideration has been given to the proposed vehicular access and the character and appearance of the surrounding area. The proposal strikes a balance between the interests of efficient land use and seeking to retain the character of the area.

## **3 Layout and Scale**

- 3.1 The layout has been influenced by the relationship to the existing properties on Neville Street and Derby Road.

## **4 Access**

- 4.1 The site is located on land off the adopted highway off Neville Street.
- 4.2 The proposed development includes an off-road parking space. This area could be extended to accommodate two spaces if required.
- 4.3 The dwelling shall be in accordance with Part M of the Building Regulations, including a level access threshold at the front door.
- 4.4 An area for waste collection and storage shall be provided within the curtilage of the site i.e. to the rear of the off-road parking space.

## **5 Appearance**

- 5.1 There is no consistency to the existing architectural style in the surrounding area to strongly influence the design proposal. The proposed dwelling will be constructed of red facing brick and concrete roof tiles to reflect some of the materials in the vicinity of the site. White UPVC windows and black rainwater goods complete the external pallet.

## **6 Landscaping**

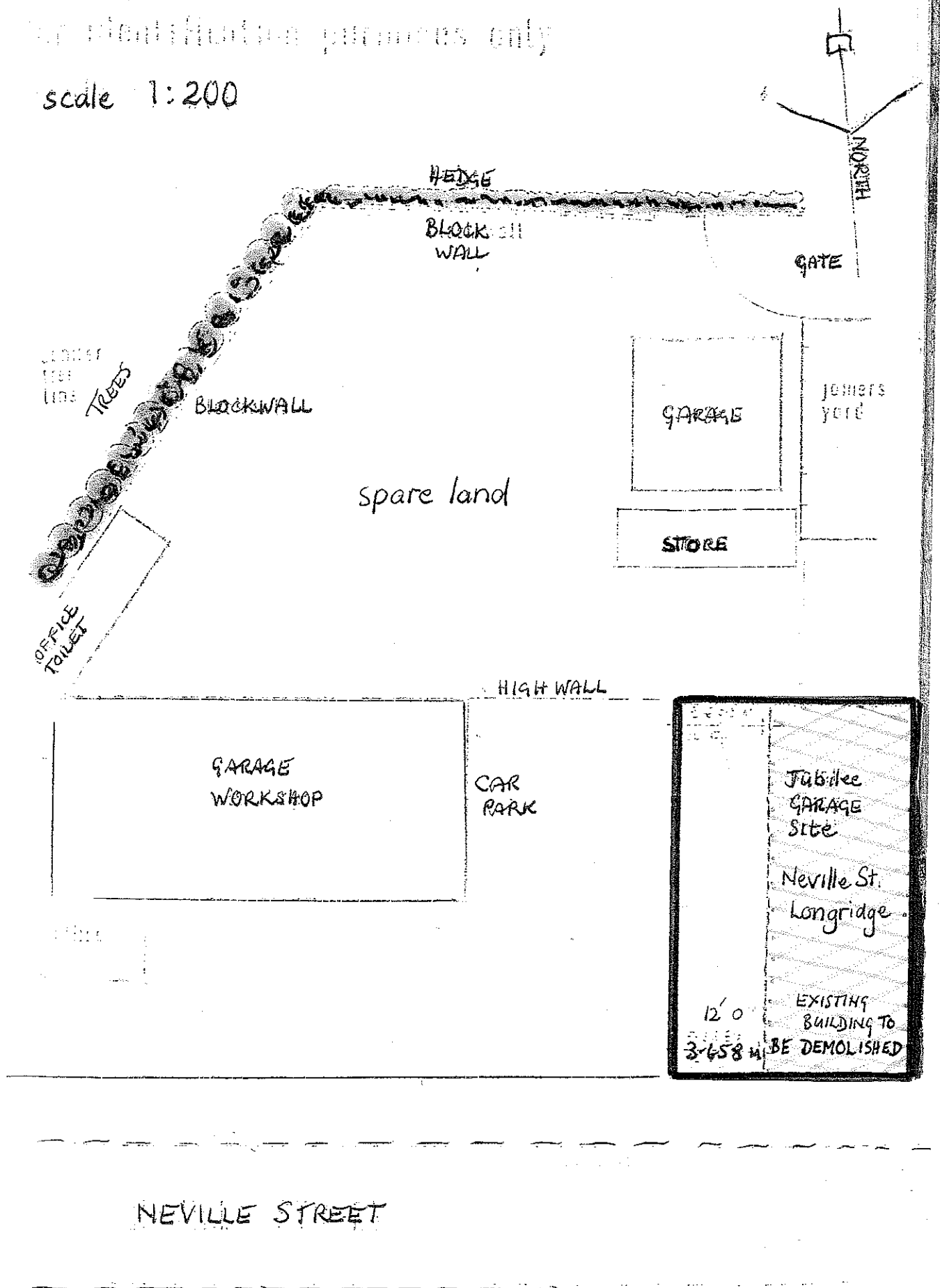
- 6.1 The location of the proposed hard and soft landscaping is identified on the submitted plan; this will enhance the appearance of the site and create an attractive living environment for the occupiers and the wider community.
- 6.2 Soft Landscaping includes a planting bed to the front boundary and a grassed area to the rear of the dwelling.
- 6.3 Hard Landscaping includes an off-road parking area and flagged areas to the perimeter.

PLAN ATTACHED TO

320120086P

for identification purposes only

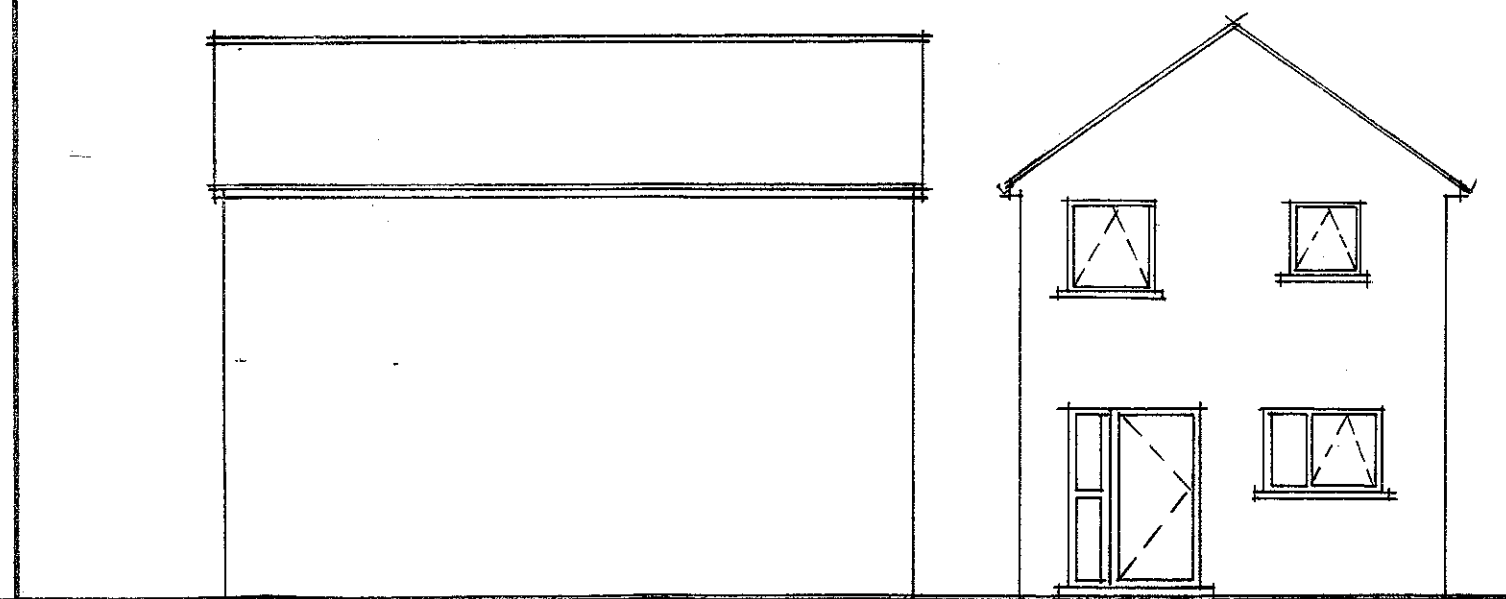
scale 1:200





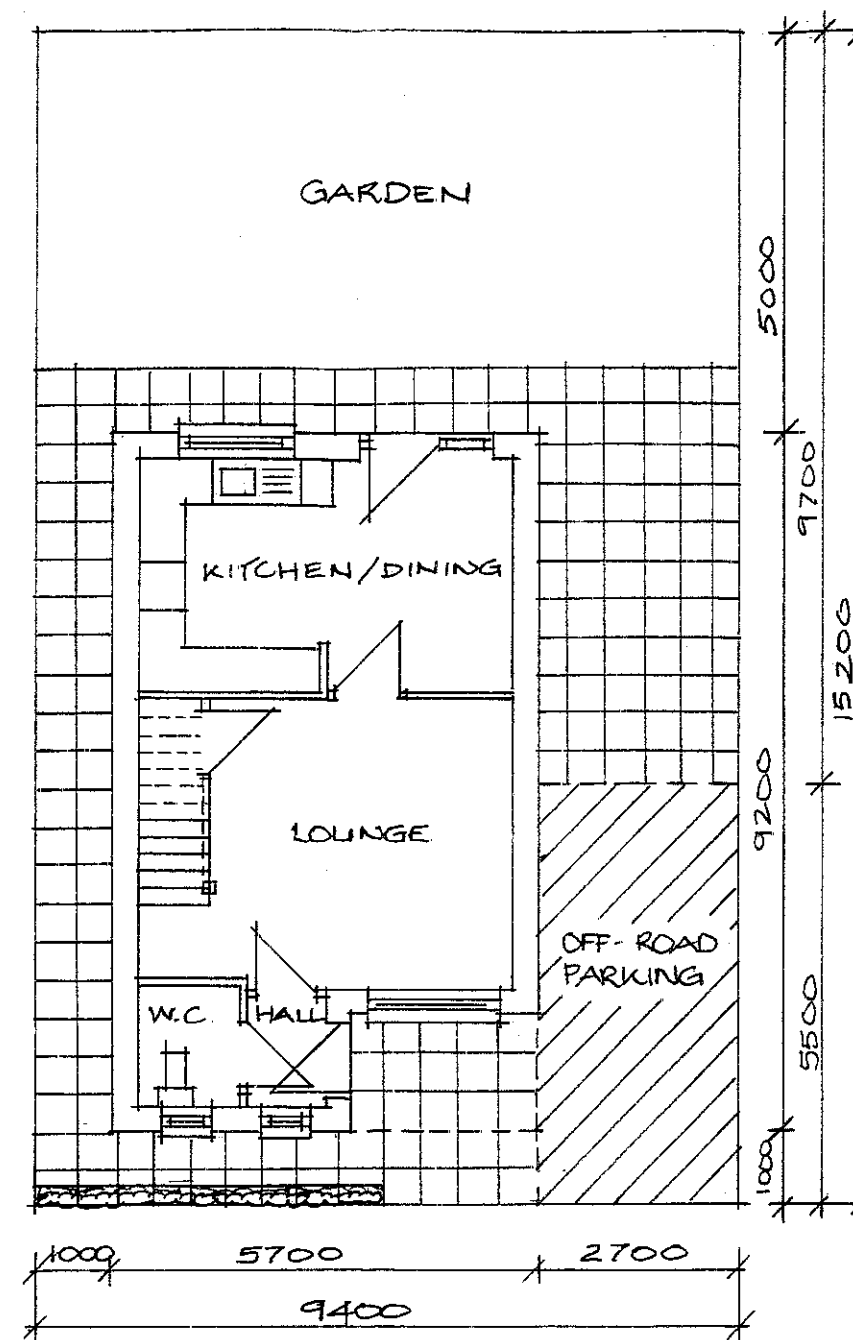
FRONT ELEVATION

SIDE ELEVATION

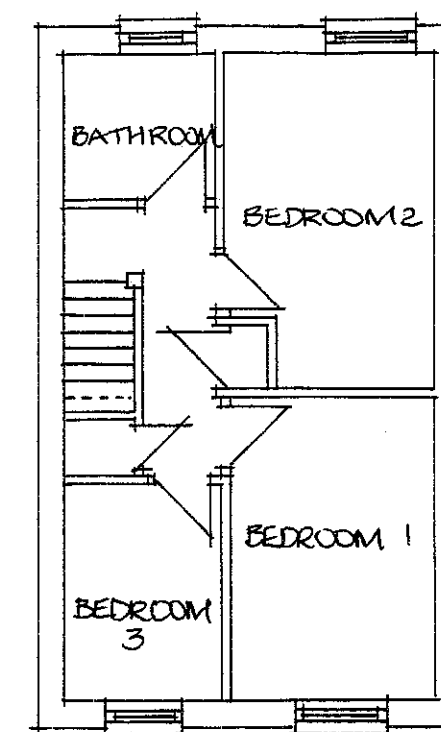


SIDE ELEVATION

REAR ELEVATION



GROUND FLOOR PLAN



FIRST FLOOR PLAN

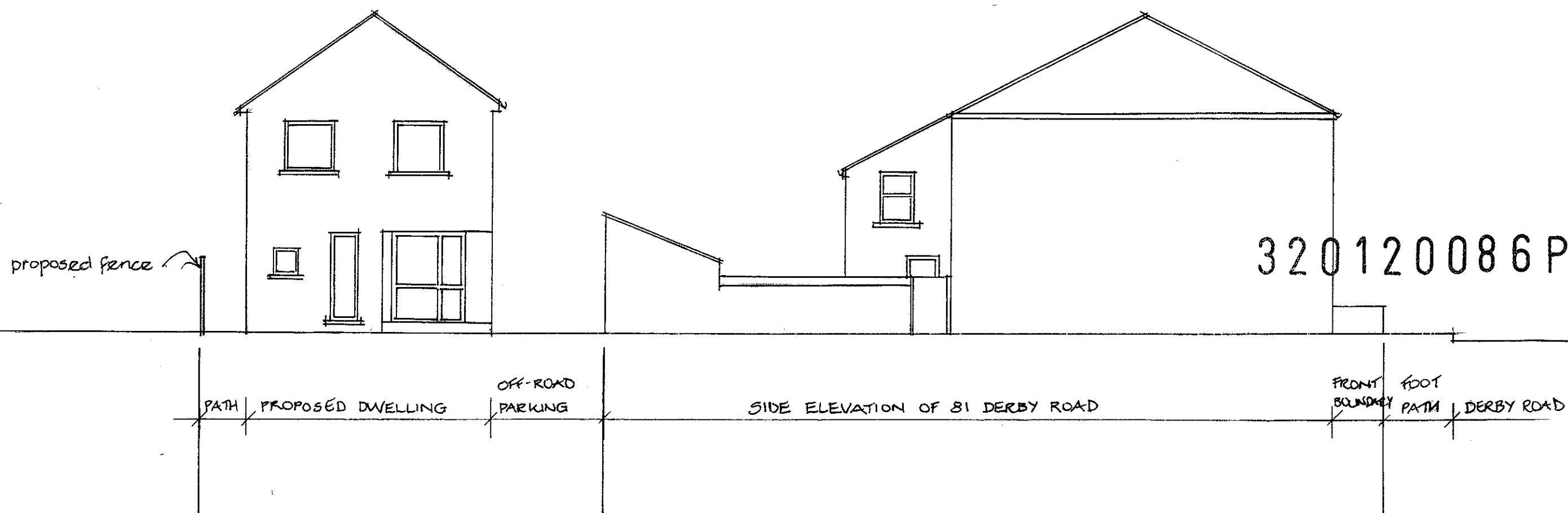
320120086P

project : NEVILLE STREET, LONGRIDGE

scale : 1:100

drawing : PROPOSED DWELLING

revision : B



project: NEVILLE STREET, LONGRIDGE

scale: 1:100

drawing: PROPOSED STREET SCENE

revision: A