



RIBBLE VALLEY  
BOROUGH COUNCIL

320130153P

17 JAN 2013

For office use only

Application No.

Date received

Fee paid £

Receipt No:

Reception

Council Offices, Church Walk, Clitheroe, Lancashire, BB7 2RA Tel: 01200 425111 www.ribblevalley.gov.uk

## Application for Outline Planning Permission With Some 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](http://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: GARY

Last name: BLACKBURN

Company (optional): N/A.

Unit: ☒ House number: 1 House suffix: ☒

House name: /

Address 1: DURHAM DRIVE

Address 2: WILPSHIRE

Address 3:

Town: BLACKBURN

County: LANCS

Country: UK.

Postcode: BB1 9NX

### 2. Agent Name and Address

Title: MR First name: RON

Last name: VALOWN

Company (optional): ARCHITECTURAL SERVICES

Unit: ☒ House number: 9 House suffix: ☒

House name: /

Address 1: GREEN DRIVE

Address 2:

Address 3:

Town: CLITHEROE

County: LANCS

Country: UK

Postcode: BB7 2BB

### 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 works:

OUTLINE APPLICATION FOR NEW DWELLING IN CURTAGE  
OF EXISTING DWELLING, AS SHOWN ON ACCOMPANYING  
SITE PLAN

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):

Please provide the full postal address of the application site.

Unit: ☒ House number: 1 House suffix: ☒

House name:

Address 1: DORNHAM DRIVE,

Address 2: WILPSHIRE,

Address 3:

Town: BLACKBURN

County: LANCS

Postcode (optional): BB1 9NX

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

Easting:  Northing:

Description:

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:

Reference:

Date (DD/MM/YYYY):   
(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)/drawings(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:

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

If Yes, please provide details:

## 8. 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

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            |
|---------------------------------------------|--------------------------------|---------------------|-------------------------------------|--------------------------|
| Walls                                       |                                |                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Roof                                        |                                |                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Windows                                     |                                |                     | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Doors                                       |                                |                     | <input checked="" 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         | GRAVEL PARKING AREA            | GRAVEL PARKING AREA | <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:

EXISTING SITE PLAN, DWG NO 385-1  
PROPOSED SITE PLAN, DWG NO 385-2  
DESIGN & ACCESS STATEMENT.  
LOCATION PLAN.

## 10. 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                                             | ONE               | TWO.                                          | <input type="checkbox"/>                              | ONE.                    |
| Light goods vehicles/<br>public carrier vehicles |                   |                                               | <input type="checkbox"/>                              |                         |
| Motorcycles                                      |                   |                                               | <input type="checkbox"/>                              |                         |
| Disability spaces                                |                   |                                               | <input type="checkbox"/>                              |                         |
| Cycle spaces                                     |                   |                                               | <input type="checkbox"/>                              |                         |
| Other (e.g. Bus)                                 | CARAVAN           | NONE.                                         | <input type="checkbox"/>                              | MINUS ONE.              |
| Other (e.g. Bus)                                 |                   |                                               | <input type="checkbox"/>                              |                         |

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):

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

How will surface water be disposed of?

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

### 13. Biodiversity and Geological Conservation

To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals

Having referred to the guidance notes, 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

### 14. Existing Use

Please describe the current use of the site:

GRAVEL PARKING AREA FOR CARAVAN & OCCASIONAL CAR PARKING

Is the site currently vacant? ☐ Yes ☒ No

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

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. Trees and Hedges

Are there trees or hedges on the proposed development site? MED (G) ☒ 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 may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. 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

### 16. 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 the gain, loss or change of use of residential units?  
If Yes, please complete details of the changes in the tables below:

☒ Yes

☐ No

### Proposed Housing

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

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

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

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

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

### Existing Housing

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

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

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

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

Total existing residential units (E+F+G+H)= 1

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

## 19. Employment

Please complete the following information regarding employees:

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

## 20. 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 |
|-----|------------------|----------|--------------------------|-----------|
|     |                  |          |                          |           |
|     |                  |          |                          |           |
|     |                  |          |                          |           |

## 21. Site Area

Please state the site area in hectares (ha)

0.04h (398m<sup>2</sup>)

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 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

### 23. 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) <input type="text"/> | Ethylene oxide (tonnes) <input type="text"/>       | Phosgene (tonnes) <input type="text"/>            |
| Ammonia (tonnes) <input type="text"/>       | Hydrogen cyanide (tonnes) <input type="text"/>     | Sulphur dioxide (tonnes) <input type="text"/>     |
| Bromine (tonnes) <input type="text"/>       | Liquid oxygen (tonnes) <input type="text"/>        | Flour (tonnes) <input type="text"/>               |
| Chlorine (tonnes) <input type="text"/>      | Liquid petroleum gas (tonnes) <input type="text"/> | Refined white sugar (tonnes) <input type="text"/> |

Other:

Other:

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

**CERTIFICATE OF OWNERSHIP - CERTIFICATE A**

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

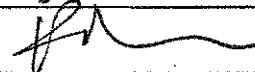
I certify/ The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application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

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):





10/1/13.

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

**Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under 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 (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 |
|---------------|---------|--------------------|
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |
|               |         |                    |

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

**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 (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 (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 (*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):

|  |
|--|
|  |
|--|

**25. Agricultural Land Declaration****AGRICULTURAL LAND DECLARATION****Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12****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:

|           |
|-----------|
| <i>PA</i> |
|-----------|

Date (DD/MM/YYYY):

|         |
|---------|
| 10/1/13 |
|---------|

(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):

|  |
|--|
|  |
|--|

**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.

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



The correct fee:

*£265*

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 a design and access statement, if required (see help text and guidance notes for details):



The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:



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



The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):



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):

10/1/13

(date cannot be pre-application)

## 28. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension number:

~~01200~~

~~427167~~

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

## 29. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension number:

01200

427167

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

01200

427167

Email address (optional):

ron@ronalovin.plus.com.

## 30. 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:

Telephone number:

Email address:



## DESIGN AND ACCESS STATEMENT PRO-FORMA

From the 10 August 2006, planning applications relating to certain types of developments are required to be submitted with a design and access statement. When submitting an application, failure to provide a design and access statement of sufficient standard may result in a delayed registration of the application.

### What Applications Need to be Accompanied by a Design and Access Statement?

Most planning applications have to be accompanied by a design and access statement, the exceptions being:

- material change in the use of land or buildings, unless it also involves operational development;
- engineering or mining operations;
- development of an existing dwellinghouse, or development within the curtilage or a dwellinghouse for any purpose incidental to the enjoyment of the dwellinghouse, where no part of that dwellinghouse or curtilage is within a designated area or is a listed building. 'Designated Areas' include: • Conservation Areas; • Sites of Special Scientific Interest (SSSI); and • Areas of Outstanding Natural Beauty (AONB).

### Process

What factors have you considered when deciding upon the use, design, scale, layout and materials used in the proposed development?

POSITION OF DWELLING LOCATED TO STILL AFFORD PRIVACY TO EXISTING BUNGALOW, WHILE PROVIDING ADEQUATE PARKING AND CURTILAGE. ALSO, POSITIONED OUTSIDE 3M BASEMENT ZONE TO WATER PIPE (AGREED WITH UNITED UTILITIES) RE-USING OF EXISTING ACCESS.

### Use

What will the extension/development be used for and justify why this is necessary?

DWELLING HOUSE.  
INFILL DEVELOPMENT USING SUPERFLUOUS PARKING AREA HELPS TO FULFIL NEED FOR HOUSING IN RIBBLE VALLEY.

### Amount

What is the proposed size of the extension/development and why is this necessary and appropriate for the setting of the development?

FLOOR AREA OF DWELLING = APPROX 130 SQ METRES. MAXIMUM HEIGHT TO RIDGE FROM EXT GL = 7 METRES. THE SCALE IS IN KEEPING WITH OTHER HOUSES ON THE ESTATE, AS IS THE PLOT AND CURTILAGE. CURTILAGE AREA = APPROX 470 SQ M.

## Layout

Why have you chosen the layout specified in the planning application and how did you eliminate alternative options?

THE LAYOUT OF THE SITE WAS DETERMINED BY AVOIDING THE WATER MAIN BASEMENT ZONE, WHILST MAINTAINING A REASONABLE DISTANCE TO THE EXISTING BUNGALOW. ALSO PROVISION OF PARKING & MANOUEVRING FROM EXISTING ACCESS.

## Scale

Is the scale of the extension/development in keeping with the context of the site and in what way?

YES AS NOTED BEFORE, THE SIZE OF THE PLOT AND NEW DWELLING IS SIMILAR TO OTHERS ON THE ESTATE

## Landscaping

If appropriate, specify the boundary treatments and any landscaping included in the development. You may need to justify why certain materials or planting have been used?

TO BE DECIDED AT DETAILED APPLICATION STAGE

## Appearance

Specify how the extension/development fits in terms of its appearance and include details of materials to be used.

TO BE DECIDED AT DETAILED APPLICATION STAGE

## Access

Explain how the extension/development will be accessed by vehicles and people. You should consider the need for access by all members of society and emergency vehicles

THE EXISTING ACCESS TO THE SITE IS MAINTAINED. THIS IS MORE THAN ADEQUATE BECAUSE WATER BOARD VEHICLES USE IT. ACCESS FROM THE GATE & PARKING AREA WILL BE LEVEL UP TO THE HOUSE.

320130153P



1 Durham Drive  
Wilshire  
BD1 9NX

OS Mastermap  
11 July 2012, ID: MDP-00162977  
[www.mapdataportal.co.uk](http://www.mapdataportal.co.uk)

1:1250 scale print at A4, Centre: 368875 E, 432878 N

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Tel: 0161 926 0650

320130153P

BEDROOM  
WINDOW

EXISTING  
BUNGALOW  
NO 1

GARAGE

PATH  
GRASS BANK

NEW  
DWELLING

PARKING  
AREA—  
2 NO SPACES

3.4m =  
DIM TO  
CORNERS  
OF HOUSE

3M EASEMENT  
DRIVE LANE  
WATER MAIN LINE  
AGREED WITH UNITED UTILITIES

5M  
STANDARD 5M EASEMENT ON THIS SIDE

EXISTING  
ACCESS



SCALE 1:250

1 DURHAM DRIVE  
WILPSHIRE  
BLACKBURN  
BB1 9NX

DRAWG NO 385-2

PROPOSED SITE PLAN

320130153 PL

1:250

