

Please complete this form in block capitals using black ink to facilitate scanning.
 You are advised to read the accompanying guidance notes and per-question help text.
 If you would rather make this application online, you can do so on our website:
<https://www.planningportal.co.uk/apply>

Application for Planning Permission

Town and Country Planning Act 1990 (as amended)

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

320240464P



RIBBLE VALLEY
BOROUGH COUNCIL

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

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website. Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

1. Applicant Name and Address

Title: MR First name: MARK

Last name: DONEY

Company (optional): ARKENSTONE DEVELOPMENT

Unit: House number: 36 House suffix:

House name: /

Address 1: YORK STREET

Address 2:

Address 3:

Town: CLITHROE

County: LANCASHIRE

Country: RIBBLE VALLEY ENGLAND

Postcode: BB7 2DL

2. Agent Name and Address

Title: MR First name: JOHN

Last name: SUMMERS

Company (optional): J. S. A

Unit: House number: 6 House suffix:

House name:

Address 1: ACREFIELD

Address 2: PADHAM

Address 3:

Town: BURMLEY

County: LANCASHIRE

Country: ENGLAND

Postcode: BB12 8HW

3. Description of the Proposal

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

TO BUILD A FOUR BED ROOM HOUSE

Has the building, work or change of use already started?

Yes No

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

Has the building, work or change of use been completed?

Yes No

If Yes, please state the date when the building, work or change of use was completed (DD/MM/YYYY):

Reference number of permission in principle being relied on (technical details consent applications only):

Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/5/595 as amended by article 3 of S.I. 746/2021)?

Yes No

4. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name: THE BARN

Address 1: RAKESBTON

Address 2: GEORGE LANE

Address 3: READ

Town: LANCSHIRE

Postcode (optional): B812 7GY

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

Easting: Nothing:

NEW ENTRANCE FORMED FROM EXISTING TO ALLOW ACCESS TO THE SUB STATION

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:

Reference: LEE GREEN WOOD

Reference: RV/2018/ENG/00112

Date (DD/MM/YYYY): 17/12/2018

Details of pre-application advice received?

NEEDS TREE SURVEY.

8. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent? Yes No

(a) a member of staff
 (b) an elected member
 (c) related to a member of staff
 (d) related to an elected member

If Yes, please provide details of their name, role and how you are related to them.

7. Waste Storage and Collection

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

If Yes, please provide details:

SHOWN ON GF PLAN

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

If Yes, please provide details:

SHOWN ON GF PLAN

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

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

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

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

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

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)

MARKED ON SITE PLAN

9. Materials

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

Existing (where applicable)	Proposed	Not applicable	Don't know
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Walls

STONE TO FRONT ELEVATION, SIDES & REAR IN RENDER

Roof

BLUE GREY SLATE

Windows

OAK PVC OR CREAM PVC

Doors

ROCK DOORS FOR SECURITY

Boundary treatments (e.g. fences, walls)

FENCES TO REAR STONE WALLED TO FRONT

Vehicle access and hard-standing

PAVING FOR SUSTAINABLE DRAINAGE SYSTEM

Lighting

HIGH EFFICIENCY INTERNAL LED ON PASSIVE EXTERNAL

Others (please specify)

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:

DRAWING SET 5A - 24 - 113A - PLUS SITE PLAN DESIGN STATEMENT = TREE SURVEY

10. Vehicle Parking

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

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	1	6	6
Light goods vehicles/public carrier vehicles	1	1	1
Motorcycles	1	2	2
Disability spaces	1	INCLUDED IN ABOVE	1
Cycle spaces	1	2	2
Other (e.g. Bus)	1	1	1
Other (e.g. Bus)	1	1	1

11. Foul Sewage

Please state how foul sewage is to be disposed of:

Mains sewer

Septic tank

Package treatment plant

Are you proposing to connect to the existing drainage system? 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):

ON SITE PLAN

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

15. 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 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 'B55837: Trees in relation to design, demolition and construction - Recommendations'.

12. 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.)

No Yes

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)?

No Yes

Will the proposal increase the flood risk elsewhere?

No Yes

How will surface water be disposed of?

Sustainable drainage system

Existing watercourse

Soakaway

Pond/lake

Main sewer

14. Existing Use

Please describe the current use of the site:

SUB STATION & POWER LINES

Is the site currently vacant? Yes No

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

POWER LINES

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

N/A

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? No Yes

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

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

16. Trade Effluent

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

No Yes

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

17. Residential Units (Including Conversion)

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

Proposed Housing		Existing Housing					
Market Housing	Number of Bedrooms	Not known	Total	Market Housing	Number of Bedrooms	Not known	Total
Houses				Houses			
Flats/maisonettes				Flats/maisonettes			
Sheltered housing				Sheltered housing			
Bedsit/studios				Bedsit/studios			
Cluster flats				Cluster flats			
Other				Other			
Totals (a+b+c+d+e+f) = 1				Totals (a+b+c+d+e+f) =			

Social, Affordable or Intermediate Rent		Social, Affordable or Intermediate Rent					
Market Housing	Number of Bedrooms	Not known	Total	Market Housing	Number of Bedrooms	Not known	Total
Houses				Houses			
Flats/maisonettes				Flats/maisonettes			
Sheltered housing				Sheltered housing			
Bedsit/studios				Bedsit/studios			
Cluster flats				Cluster flats			
Other				Other			
Totals (a+b+c+d+e+f) =				Totals (a+b+c+d+e+f) =			

Affordable Home Ownership		Affordable Home Ownership					
Market Housing	Number of Bedrooms	Not known	Total	Market Housing	Number of Bedrooms	Not known	Total
Houses				Houses			
Flats/maisonettes				Flats/maisonettes			
Sheltered housing				Sheltered housing			
Bedsit/studios				Bedsit/studios			
Cluster flats				Cluster flats			
Other				Other			
Totals (a+b+c+d+e+f) =				Totals (a+b+c+d+e+f) =			

Starter Homes		Starter Homes					
Market Housing	Number of Bedrooms	Not known	Total	Market Housing	Number of Bedrooms	Not known	Total
Houses				Houses			
Flats/maisonettes				Flats/maisonettes			
Bedsit/studios				Bedsit/studios			
Other				Other			
Totals (a+b+c+d) =				Totals (a+b+c+d) =			

Self Build and Custom Build		Self Build and Custom Build					
Market Housing	Number of Bedrooms	Not known	Total	Market Housing	Number of Bedrooms	Not known	Total
Houses				Houses			
Flats/maisonettes				Flats/maisonettes			
Bedsit/studios				Bedsit/studios			
Other				Other			
Totals (a+b+c+d) =				Totals (a+b+c+d) =			

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

Total existing residential units (F+G+H+I+J) = 0

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

5182024

18. All Types of Development: Non-residential Floorpace

Does your proposal involve the loss, gain or change of use of non-residential floorpace? Yes No

If you have answered Yes to the question above please add details in the following table:

Use class/type of use	Shops	Net tradable area	A2 Financial and professional services	A3 Restaurants and cafes	A4 Drinking establishments	A5 Hot food takeaways	B1 (a) Office (other than A2)	B1 (b) Research and development	B1 (c) Light industrial	B2 General industrial	B8 Storage or distribution	C1 Hotels and halls of residence	C2 Residential institutions	D1 Non-residential	D2 Assembly and leisure	OTHER	Please Specify	Total
Existing gross internal floorpace (square metres)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Gross internal floorpace to be lost by change of use or demolition (square metres)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Total gross internal floorpace proposed (including change of use)(square metres)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Net additional gross internal floorpace following development (square metres)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

Use class	Type of use applicable	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
C1 Hotels	<input type="checkbox"/>			
C2 Residential Institutions	<input type="checkbox"/>			
OTHER	<input type="checkbox"/>			
Please Specify	<input type="checkbox"/>			

19. Employment

Please complete the following information regarding employees:

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

20. Hours of Opening

If known, please state the hours of opening (e.g. 15:30) 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)

0.96 ha

22. Industrial or Commercial Processes and Machinery

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

Is the proposal a waste management development? Yes No

If the answer is Yes, please complete the following table:

	Not applicable	Inert landfill	Non-hazardous landfill	Hazardous landfill	Energy from waste incineration	Other incineration	Landfill gas generation plant	Pyrolysis/gasification	Metal recycling site	Transfer stations	Material recovery/recycling facilities (MRFs)	Household civic amenity sites	Open windrow composting	In-vessel composting	Anaerobic digestion	Any combined mechanical, biological and/or thermal treatment (MBT)	Sewage treatment works	Other treatment	Recycling facilities construction, demolition and excavation waste	Storage of waste	Other waste management	Other developments
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)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maximum annual operational throughput in tonnes (or litres if liquid waste)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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:

<input type="checkbox"/>	Acrylonitrile (tonnes)	<input type="checkbox"/>	Ethylene oxide (tonnes)	<input type="checkbox"/>	Phosgene (tonnes)
<input type="checkbox"/>	Ammonia (tonnes)	<input type="checkbox"/>	Hydrogen cyanide (tonnes)	<input type="checkbox"/>	Sulphur dioxide (tonnes)
<input type="checkbox"/>	Bromine (tonnes)	<input type="checkbox"/>	Liquid oxygen (tonnes)	<input type="checkbox"/>	Flour (tonnes)
<input type="checkbox"/>	Chlorine (tonnes)	<input type="checkbox"/>	Liquid petroleum gas (tonnes)	<input type="checkbox"/>	Refined white sugar (tonnes)
<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:
<input type="checkbox"/>	Amount (tonnes):	<input type="checkbox"/>	Amount (tonnes):	<input type="checkbox"/>	Amount (tonnes):

24. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form

CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/the applicant was the owner* of any part of the land or building to which the application relates is, or is part of, an agricultural holding**

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.
** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 55(8) of the Act.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

27/05/2024

CERTIFICATE

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates.

* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.
** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990

Name of Owner / Agricultural Tenant

Address

Date Notice Served

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Table with 3 columns and 6 rows, crossed out with a large X. The columns correspond to the labels: Name of Owner / Agricultural Tenant, Address, and Date Notice Served.

25. 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 (LPA) has been submitted.

- The original and 3 copies* of a completed and dated application form.
- The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North.
- The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application.
- The 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 a fire statement, if required (see help text and guidance notes for details).
- The original and 3 copies* of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):

The correct fee: f 578.00

*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPA's may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options. Plans can be bought from one of the Planning Portal's accredited suppliers: <https://www.planningportal.co.uk/buyaplanningmap>

26. Declaration

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

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

27/05/2024

(date cannot be pre-application)

27. Applicant Contact Details

Telephone numbers
Country code: National number: Extension number:

Country code: Mobile number (optional):
Country code: Fax number (optional):
Country code: National number: Extension number:

Email address (optional):

28. Agent Contact Details

Telephone numbers
Country code: National number: Extension number:

Country code: Mobile number (optional):
Country code: Fax number (optional):
Country code: National number: Extension number:

Email address (optional):

29. 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)
If Other has been selected, please provide:
Contact name:
Telephone number:

Applicant
Agent
Other (if different from the agent/applicant's details)

Email address:
Telephone number: