

Planning Application - part 1



A1. Applicant Details

Organisation

Orwell Housing Association

Name

Title **Forename** **Surname**

Mr Greg Dodds

A1.1 Address Details

Name or flat number

Property number or name

Crane Hill Lodge

Street

325 London Road

Locality

Town

Ipswich

County

Suffolk

Postal Town

Postcode

IP2 0BE

A1.2 Communication Details

Telephone No.

Nat Code **Extn No.**

228648 01473

Daytime Telephone No.

Fax No.

Email Address

gdodds@orwell-housing.co.uk

DX Number

A2. Agent Details

Organisation

The Johns Practice

Name

Title	Forename	Surname
Mr.	Andrew	Conway

A2.1 Address Details

Name or flat number

Property number or name

The Studio

Street

Oaks Drive

Locality

Town

Newmarket

County

Suffolk

Postal Town

Postcode

CB8 7SX

A2.2 Communication Details

Telephone No.

Nat Code	Extn No.
01638662393	

Daytime Telephone No.

01638662393	
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Fax No.

08701991480	
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Email Address

andrew@johnspractice.co.uk

DX Number

1. Site Address Details

1.1 Address Details

Name or flat number	<input type="text"/>
Property number or name	<input type="text" value="19"/>
Street	<input type="text" value="Leopold Road"/>
Locality	<input type="text"/>
Town	<input type="text" value="FELIXSTOWE"/>
County	<input type="text" value="Suffolk"/>
Postal Town	<input type="text"/>
Postcode	<input type="text" value="IP11 7NP"/>
UPRN	<input type="text" value="00"/>
Location	<input type="text"/>

2. Description of the Proposed Development

Development Description

Proposed conversion of existing house containing 7 bedsits and 1 flat into 5 self contained flats for the young homeless. Proposed Extension at rear of existing scheme comprising communal staircase leading to 3 additional self-contained flats for the young homeless.

3. Type of Application

Type	<input type="checkbox"/> Outline <input type="checkbox"/> Approval of Reserved Matters <input checked="" type="checkbox"/> Full <input type="checkbox"/> Renewal of temporary permission <input type="checkbox"/> Renewal of unexpired permission <input type="checkbox"/> Removal of Condition <input type="checkbox"/> Variation of Condition															
Outline or Reserved Matters Applications. Following recent legislation changes to outline permission please read the help-text for new requirements.	<table border="0"> <tr> <td>Layout (Previously Siting)</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Scale (Previously Design)</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>External Appearance</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Means of Access</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td>Landscaping</td> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>	Layout (Previously Siting)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Scale (Previously Design)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	External Appearance	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Means of Access	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Landscaping	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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Means of Access	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Landscaping	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No														
Reference Number of existing application	<input type="text"/>															
Date of previous decision (yyyy-mm-dd)	<input type="text"/>															
Condition Number	<input type="text"/>															

Proposal Type

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

4. Access

Is existing access affected?

Pedestrian Yes No

Vehicular Yes No

Is a new access type proposed?

Pedestrian Yes No

Vehicular Yes No

Disability Access

Ramped access provided to existing house. Flush threshold to communal entrance of proposed extension. Two flats at ground floor will be wheelchair accessible.

5. Other Information

A. Planting of trees, shrubs or hedges

Yes No

B. Lopping or topping of trees or the removal of trees shrubs or hedges

Yes No

C. Storage of waste

Yes No

6. Public Rights Of Way

Do you propose to alter or divert a Public Right of Way?

Yes No

Is the site adjacent to a Public Right Of Way?

Yes No

Describe the proposed alteration of the Public Right of Way

7. Materials

Walls

To Match Existing

Roof

To Match Existing

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

To Match Existing

8. Site Area & Floor Space

Site Area

601

Units

square metres
 hectares

Width of site frontage

12.7

metres

**Is the application for new building works?
 Please state the existing floorspace of the building**

Yes No

283

sq.m

Please state the proposed new floorspace

188

sq.m

**Is the proposal for a change of use?
 Please state the floorspace related to the change of use**

Yes No

0

sq.m

**Does the proposal involve the removal or demolition of
 any part of the existing building?**

Yes No

Description of removal/demolition

Removal of existing internal walls and/ or opening up for new door positions. All walls to be removed are shown on proposed floor plans. Opening up of existing external wall where small extension proposed to south-west corner of existing house.

9. Existing Uses

Current use of land or building

Bedsit accomodation for the young homeless.

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

10. Residential Information

Select the type of land the development is on

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

Is the number of residential units changing?

If Yes, fill out the table below:

	Existing	Proposed	Net Gain
Houses or Bungalows	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Flats/Maisonettes/Apartments	<input type="text" value="1"/>	<input type="text" value="8"/>	<input type="text" value="7"/>
Bedsits	<input type="text" value="7"/>	<input type="text" value="0"/>	<input type="text" value="-7"/>
Other <input type="text" value=""/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

11. Interest

State the applicant's interest in the land

- Owner
- Lessee
- Prospective purchaser
- Other

If Other give details

Does the applicant own or control any adjoining land?
 Has any part of the site been in council ownership?

- Yes No
- Yes No

12. Height

State the height of the new development

 metres

13. Car Parking

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

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

14. Drainage

State method of disposal for surface water

As Existing

State method of disposal for foul sewage

As Existing

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

15. Previous Applications

Any previous known applications for this proposal? Yes No

Reference Number

Date of Application (yyyy-mm-dd)

16. Details

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

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

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

Signature **Electronically submitted; no signature required.**

Certificate A

I certify that:

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

Signatory

	Title	Forename	Surname
Signatory	<input type="text" value="Mr"/>	<input type="text" value="Andrew"/>	<input type="text" value="Conway"/>
Signature	Electronically submitted; no signature required.		
Date (yyyy-mm-dd)	<input type="text" value="2007-11-02"/>		

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

Agricultural Holdings Certificate

None of the land to which the application relates is, or is part of, an agricultural holding. I have/the applicant has given the requisite notice to every person other than my/him/herself who, on the day 21 days before the date of this application was a tenant of an agricultural holding on all or part of the land to which the application relates as follows:

Signatory

	Title	Forename	Surname
Signatory	<input type="text" value="Mr"/>	<input type="text" value="Andrew"/>	<input type="text" value="Conway"/>
Signature	Electronically submitted; no signature required.		
Date (yyyy-mm-dd)	<input type="text" value="2007-11-02"/>		

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