

Frond of our past. Energised for our future.

Copeland Borough Council
The Copeland Centre,
Catherine Street, Whitehaven,
Cumbria CA28 7SJ

tel: 0845 054 8600 fax: 01946 59 83 03 email: info@copeland.gov.uk web: www.copeland.gov.uk

Application for Planning Permission. 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 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	2. Agent Name and Address
Title: MS. First name: OLIVIA	Title: MA. First name: TONY
name: WEST	Last name: BARNETT
Company (optional):	Company (optional):
Unit: House House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: 90 SCHOOL CROFT	Address 1: 3 GEE LONG TERRACE
Address 2: SANDWTH	Address 2: SANDWITH
Address 3:	Address 3:
Town: WHITEHAVEN	TOWN: WHITEHAVEN
County:	County:
Country:	Country:
rustcode: CA78. 9NP	Postcode: CA28, 4 UQ
3. Description of the Proposal Please describe the proposed development, including any change of	fuse:
DETACHED DNELLING	
	> _
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):	(date must be pre-application submission)
Has the building, work or change of use been completed? If Yes, please state the date when the building, work	Yes No
or change of use was completed: (DD/MM/YYYY):	(date must be pre-application submission)

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House House suffix:	authority about this application? Yes No
House name: LAND ADJACENT TO:	if Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: SCHOOL CROFT	application more efficiently). Please tick if the full contact details are not
Address 2: SANDWITH	known, and then complete as much as possible:
Address 3:	Officer name:
Town: WHITEHAVEN	S. PAPALEO
County:	Reference:
Postcode (optional): CA2B.9UP	CECORIG. REF - 4/12/2496/001
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	FOLLOWING REFUSAL FOR 4 NO. DWELLINGS, ADVISED TO APPLY FOR SINGLE DWELLING
	DWELLINGS, ADVISED TO APPLY
	FOR SINGLE DIVELLING
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed	Do the plans incorporate areas to store
to or from the public highway? Yes V No	and aid the collection of waste? Yes V No
Is a new or altered pedestrian . access proposed to or from	If Yes, please provide details:
the public highway? Yes No	
Are there any new public roads to be provided within the site?	\overline{x}
Are there any new public	, I
rights of way to be provided within or adjacent to the site?	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made
creation of rights of way?	for the separate storage and collection of recyclable waste?
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
	1
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member (c) related to a member of staff	
(d) related to an elected membe	282 Gr
If Yes, please provide details of the name, relationship and role	

	Existing (where applicab	le)		Proposed	Not applicabl	Don't
Walls	D = 0			SMOOTH RENDER, WHITE & SANDSTONE TO FRONT.	<u>'</u>	
Roof	6			GREY MARLEY MODERN		
Windows				UPYC		
Doors	a d	***		upre		
undary treatments (e.g. fences, walls)				POST/WIRE FENRE - IN HT		
Vehicle access and hard-standing				TARMAZ		
Lighting				-	d	
Others (please specify)		_	5.		□	
		on on submitted plan(an(s)/drawing(s)/desig)/design and access statement? Yes	es [No
143	-	CHED DRAW				
0. Vehicle Parkir	_				<u> </u>	· ·
Please provide info		xisting and proposed r Total		proposed (including Differen		
Cars Desired Existing			spaces retained) in space:			
Light goods veh	nicles/	<u> </u>				_
Motorcycle						
Disability spa	ces		П			
Cycle space	15					
Other (e.g. B	us)				N =	
Other (e.g. Rus)						

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	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
Mains sewer Cess pit	consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere? Yes No
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
_	Please describe the current use of the site:
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	AGRICULTURAL USE
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	Is the site currently vacant? Yes No
and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	AS ABOVE
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	When did this use end (if known)?
₩ No	DD/MM/YYYY . 2019
b) Designated sites, important habitats or other blodiversity features:	(date where known may be approximate) Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination
Yes, on land adjacent to or near the proposed development	assessment with your application.
No No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable
No No	to the presence of contamination?
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste?
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the	of trade effluents or waste
of the local landscape character? Yes VNo	[1]
If Yes to either or both of the above, you <u>may</u> 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	
	r i i

	ropos	ed l	lous	ing					Existi	ng l	lous	Ing			
Market	Not		Numt	per of	Bedro	ooms	Total	Market	Not		Numb	er of	Bedro	ooms	Tota
Housing	known	7	2	3	4+	Unknown		Housing	known	1.	2	3	4+	Unknown	
Houses				V			7.7	Houses							100
Flats and maisonettes				=			<i>h</i> ; ()	Flats and maisonettes				_	_		500
Live-work units							X-	Live-work units							- 60
Cluster flats							- G	Cluster flats							11
Sheltered housing			<u> </u>				-6	Sheltered housing							E.
Bedsit/studios						ı	,	Bedsit/studios							
Unknown type							ý.	Unknown type					T	TIA '	12
	Te	otals	(a + b	++++	d+e	+f+g)=	/4 E		Te	otals	(a + b	+ C+	d+e	+f+g)=	1.5
Social Rented	Not known	1				ooms Unknown	Total	Social Rented	Not known	1	T			ooms Unknown	Tota
Houses			2	3	41	DUKUOWI	- 13 - 1	Houses	710411		2	3	4+	Unknown	200
s and maisonettes							3	Flats and maisonettes							14
Live-work units							1040	Live-work units	H					ļ	12.7%
Cluster flats				_			100	Cluster flats			-				- 36
Sheltered housing							157	Sheltered housing							6
Bedsit/studios							4	Bedsit/studios							
Unknown type				,			5, 0,00								3
Unknown type	and the second s				10.1	1 . C . L	d + 0	+f+g)=	7						
		Utais	(u + t	7464	ute	+1+9/-	1 le n				(UTL	757	UTE	TITY/-	
I.a	Not		Num	ber of	Bedr	ooms	Total		Not Number of Bedrooms			ooms	Tota		
Intermediate	known	1	2	3	4+	Unknow		Intermediate	known	1	2	3	4+	Unknown	
Houses		111/					σ	Houses				_			4
Flats and maisonettes						1	160	Flats and maisonettes							T (E
Live-work units							1	Live-work units				,	igsqcup	<u> </u>	50,
Cluster flats						-	d	Cluster flats							Į,
Itered housing					-		¥(I	Sheltered housing					<u> </u>		-31
dsit/studios							1	Bedsit/studios		_					
Unknown type			=			4	2	Unknown type							Ģ.
	7	otals	(0.+1	b+c+	-d+e	(+f+g)=	7		Ŧ	otal	s (a + i	+6+	d+e	+f+g)=	11.
	1						 	·		_		4			T-4-
Key worker	Not	1	Num 2	ber o	Bedr 4+	ooms Unknowr	Total	Key worker	Not known	1	Num 2	ber of		ooms Unknowr	Tota
Houses		<u> </u>	1		1 4.	O I I I I I I I I I I I I I I I I I I I	5	Houses		╅	1		1		11
Flats and maisonette	 						1 1	Flats and maisonettes	-						-{5
Live-work units		-	 				3	Live-work units					 		
Cluster flats	盲				1-	1		Cluster flats			†	1			=74
Sheltered housing							- 2	Sheltered housing				1		 	2
Bedsit/studios	1 =		-				r	Bedsit/studios							4
Unknown type	1						.3	Unknown type	+				1		2.5
		otak	10+	b + c +	-d+e	+f+g)=	5		<u> </u>	otal	(a + i) + C 1	d+e	+f+g)=	130

18. All Types of Development: Non-residential Floorspace								
Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No								
If you have answered Yes to the question above please add details in the following table:								
Us	Use class/type of use		Existing gross Internal floorspace (square metres	to be lost by use or de	change of molition	Total gross internal floorspace proposed (including change of use)(square metres)	following development	
A1	Shops							
	Net tradable area:							
A2	Financial and professional services		U		1			
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							
88	Storage or distribution			1				
C1	Hotels and halls of residence							
C2	Residential institutions							
D1	Non-residential institutions							
D2	Assembly and leisure							
OTHER								
Please Specify		Ø						
	Total							
In add	lition, for hotels, residenti	al ins	titutions and he	ostels, please ad	ditionally ind	licate the loss or gain of	rooms	
Use class	Type of use applicable	Existi	ng rooms to be of use or den	lost by change	Total room	s proposed (including anges of use)	Net additional rooms	
C1	Hotels							
	nstitutions							
OTHER Please								
Specify				*		70		
19. Emp	oloyment							
Please co	mplete the following info	rmati	on regarding ei	mployees:				
			Full-time	Part	lime		al full-time quivalent	
Existing employees								
_Proposed employees								
20. Hou	rs of Opening	·-				······································		
Please	state the hours of openir	ng for	each non-resid	iential use propo	sed:			
	Use Mo	nday	to Friday	Saturday		Sunday and Bank Holidays	Not known	
						•		
21. Site								
rease stat	e the site area in hectares	(ha)		•				

22. Industrial or Commercial Processes and Machinery								
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed on	icts including include the							
Is the proposal a waste management development?								
If the answer is Yes, please complete the following table:								
	同 including engi	acity of the void in cubic metre ineering surcharge and making r cover or restoration material (ild waste or litres if liquid waste	or throughput in tonnes					
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	<u>심</u>							
Other treatment Recycling facilities construction, demolition								
and excavation waste	Ш	**						
Storage of waste								
Other waste management	<u> </u>							
Other developments								
Please provide the maximum annual operat	ional throughput of t	he following waste streams:						
Municipal								
Construction, demolition and e								
Hazardous	ridi							
If this is a landfill application you will need t planning authority should make clear what	o provide further info information it require		n can be determined. Your waste					
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities state		☐ No ☐ Not ap	plicable					
If Yes, please provide the amount of each substance that is involved:								
Acrylonitrile (tonnes)	Ethylene oxide (t	onnes)	Phosgene (tonnes)					
Ammonia (tonnes)	Hydrogen cyanide (t	onnes)	Sulphur dioxide (tonnes)					
Bromine (tonnes)	Liquid oxygen (t	onnes)	Flour (tonnes)					
Chlorine (tonnes)	quid petroleum gas (t	onnes) Re	efined white sugar (tonnes)					
Other:		Other:						
Amount (tonnes):		Amount (tonnes):						

		6 4
24. Ownership Certificates and	Agricultural Land Declaration	
One Certi	ficate A, B, C, or D, must be completed with this application form	n e
	CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
I certify/The applicant certifies that on the	evelopment Management Procedure) (England) Order 2010 Cerl ne day 21 days before the date of this application nobody except my g to which the application relates, and that none of the land to which	self/ the applicant was the
NOTE: You should sign Certificate B, C application relates but the land is, or i	or D, as appropriate, if you are the sole owner of the land or bu s part of, an agricultural holding.	ilding to which the
"owner" is a person with a freehold intere ""agricultural holding" has the meaning	st or leasehold interest with at least 7 years left to run. given by reference to the definition of "agricultural tenant" in section 6:	5(8) of the Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		21.04.2020
** "agricultural tenant" has the meaning g	st or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1990	
Name of Owner / Agricultural Tenant	Address	Date Notice Served
JANICE BURNE	SCHOOL CROFT, SANDWITH, WHITEHAVEN CASS, 9UP	JAN. 2020
	ES	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		21.04.2020

24. Ownership Certificates and Agrico CE Town and Country Planning (Developm I certify/ The applicant certifies that: Neither Certificate A or B can be issued All reasonable steps have been taken to the land or building, or of a part of it, but ""owner" is a person with a freehold interest or lead "" agricultural tenant" has the meaning given in some the steps taken were:	RTIFICATE OF OWNERSHIP nent Management Procedure for this application of find out the names and addut I have/ the applicant has be assented interest with at least 7 visehold interest with a least 8 visehold interest wit	resses of the other owners* and red unable to do so.	
Name of Owner / Agricultural Tenant	Add	dress	Date Notice Served
		W	
	/		
			A: 0
Notice of the application has been published in	the following newspaper	On the following date	(which must not be earlier
(circulating in the area where the land is situated	d):	than 21 days before th	e date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
Town and Country Planning (Developm I certify/ The applicant certifies that: Certificate A cannot be issued for this ap All reasonable steps have been taken to date of this application, was the owner* have/ the applicant has been unable to c ""owner" is a person with a freehold interest or lease "agricultural tenant" has the meaning given in se The steps taken were:	plication find out the names and addre and/or agricultural tenant** of do so. ehold interest with at least 7 we	esses of everyone else who, on of any part of the land to which	the day 21 days before the
. «			*
Notice of the application has been published in a (circulating in the area where the land is situated	te following newspaper):	On the following date than 21 days before th	(which must not be earlier e date of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
25. Planning Application Requiremen Please read the following checklist to make sure y information required will result in your application the Local Planning Authority has been submitted	you have sent all the information being deemed invalid. It w	tion in support of your proposa ill not be considered valid until TRANSFERED	all information required by
The original and 3 copies of a completed and dat application form:		correct fee: 4/18/2496/00	
The original and 3 copies of the plan which identi the land to which the application relates drawn to identified scale and showing the direction of Nor	ifies If required the control of the	original and 3 copies of a designuired (see help text and guidar original and 3 copies of the com	nce notes for details):
The original and 3 copies of other plans and draw information necessary to describe the subject of t	dings or	ership Certificate (A, B, C or D – Article 12 Certificate (Agricultur	as applicable)

26. Declaration I/we hereby apply for planning permission/const Information. I/we confirm that, to the best of my, genuine opinions of the person(s) giving them. Signed - Applicant:	ent as described in t /our knowledge, any Or signed - Agent	his form and the accompanying plans/drawings and additional racts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY): 21.04.2020 (date cannot be pre-application)
27. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	28. Agent Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
29. Site Visit Can the site be seen from a public road, public fo If the planning authority needs to make an appoil out a site visit, whom should they contact? (Pleas If Other has been selected, please provide: Contact name: Email address:	intment to carry	r other public land? Yes No Applicant Other (If different from the agent/applicant's details) Telephone number:

24. Ownership Certificates and A	gricultural Land Declaration								
One Certific	ate A, B, C, or D, must be completed with this application for								
I certify/The applicant certifies that on the owner of any part of the land or building	elopment Management Procedure) (England) Order 2010 Cer day 21 days before the date of this application nobody except to be which the application relates, and that none of the land to wh	ich the application relates is, or							
application relates but the land is, or is i	r D, as appropriate, if you are the sole owner of the land or b pert of, an agricultural holding.	Mikited to mare ma							
" "owner" is a person with a freehold interest "" "agricultural holding" has the meaning gi	or leasehold interest with at least 7 years left to run. ven by reference to the definition of "agricultural tenant" in section	65(8) of the Act.							
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):							
	CERTIFICATE OF OWNERSHIP - CERTIFICATE B	militaria emelor Articia 12							
certify/ The applicant certifies that I have 21 days before the date of this application application relates.	elopment Management Procedure) (England) Order 2010 Care/the applicant has given the requisite notice to everyone else (n, was the owner and/or agricultural tenant of any part of the tor leasehold interest with at least 7 years left to run. Jen in section 65(8) of the Town and Country Planning Act 1990	he land or building to which this							
Name of Owner / Agricultural Tenant	Address	Date Notice Served							
JANICE BURNE	SCHOOL CROPT, SANDWITH, WHITEHAVEN CASB. 944	Jan. 2020							
	Or signed - Agent:	Date (DD/MM/YYYY):							
Signed - Applicant:	VI Julius 1 Juliu	21.04.2010							
{{ <u></u>									