

Copeland Borough Council tel: 0845 054 8600
The Copeland Centre, fax: 01946 59 83 03 Catherine Street, Whitehaven, email: info@copeland.gov.uk Cumbria CA28 7SJ

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.

1. Applicant	Name and Address) (2. Ager	nt Name and Address
Title:	First name:	Title:	First name:
Last name:		Last name	e:
Company (optional):		Company (optional)	
Unit:	House House suffix:	Unit:	House House suffix:
House name:		House name:	
Address 1:		Address 1	1:
Address 2:		Address 2	2:
Address 3:		Address 3	3:
Town:		Town:	
County:		County:	
Country:		Country:	
Postcode:		Postcode	2:
-	n of the Proposal the proposed development, including any	r change of use:	
Has the building,	work or change of use already started?	Yes	No
	e the date when building, e started (DD/MM/YYYY):		(date must be pre-application submission)
_	work or change of use been completed?	Yes	No
•	e the date when the building, work 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		Has assistance or prior advice been sought from the local authority about this application?	
Unit: House number:	House suffix:	Yes	No
House name:		If Yes, please complete the following information about the ad you were given. (This will help the authority to deal with this	vice
Address 1:		application more efficiently). Please tick if the full contact details are not	
Address 2:		known, and then complete as much as possible:	
Address 3:		Officer name:	
Town:			
County:		Reference:	
Postcode (optional):			
Description of location or a grid reference (must be completed if postcode is not k		Date (DD/MM/YYYY): (must be pre-application submission)	
Easting: North	ning:	Details of pre-application advice received?	
Description:			
6. Pedestrian and Vehicle Access, R	•	7) 7. Waste Storage and Collection	
Is a new or altered vehicle access propos to or from the public highway?	sed Yes No	Do the plans incorporate areas to store and aid the collection of waste? Yes	No
Is a new or altered pedestrian		If Yes, please provide details:	
access proposed to or from the public highway?	Yes No		
Are there any new public roads to be	1.65		
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		Have arrangements been made	
/extinguishments and/or	Yes No	for the separate storage and	NI.
creation of rights of way?		collection of recyclable waste?	No
If you answered Yes to any of the above details on your plans/drawings and stat (s)/drawings(s)		If Yes, please provide details:	
(3), 3.12.11.11.195(3)			
8. Authority Employee / Membe	 er		
With respect to the Authority, I am: (a) a (b) a (c) r		f	No
If Yes, please provide details of the nam			

9. Materials If applicable, please stat	te what mate	rials are to be used extern	ally. Include	type, colour and name for	each material:		
	Existing (where appli	cable)		Proposed		Not applicable	Don't Know
Walls							
Roof							
Windows							
Doors							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing							
Lighting							
Others (please specify)							
, , , , ,		ation on submitted plan(s)/design and access statem	nent? Yes		No
		, save, same graph design					
10. Vehicle Parkin	_						
Type of Vehic		e existing and proposed n Total	Tota	proposed (including	Difference	<u> </u>	
Cars		Existing		spaces retained)	in spaces		
	cles/						
Light goods vehi public carrier veh							
Motorcycles Disability space	Disability spaces						
Cycle spaces							
Other (e.g. Bu							
Other (e.g. Bu							

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
Mains sewer Cess pit	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.)
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)?
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
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:
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	Is the site currently vacant? Yes No
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species: Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
☐ No	When did this use end (if known)? DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)
features:	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on the development site Yes, on land adjacent to or near the proposed development	assessment with your application.
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 to the presence of contamination?
No	
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? Yes No
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 development or might be important as part of the local landscape character? Yes No	of trade effluents or waste
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 design, demolition and construction - Recommendations'.	

Proposed Housing								Existing Housing							
Market	Not		Num	ber of	Bedr	ooms	Total	Market	Not		Num	ber of	Bedr	ooms	Tota
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknown	
Houses							а	Houses							а
Flats and maisonettes							Ь	Flats and maisonettes							Ь
Live-work units							С	Live-work units							С
Cluster flats							d	Cluster flats							d
Sheltered housing							е	Sheltered housing							е
Bedsit/studios							f	Bedsit/studios							f
Unknown type							g	Unknown type							9
	T	otals	(a + b) + <i>c</i> +	d + e	+ <i>f</i> + <i>g</i>) =	Α		T	otal	s (a + b) + <i>c</i> +	d + e	+ <i>f</i> + <i>g</i>) =	Е
							T-4-1		I						T-4-
Social Rented	Not known	1	Num 2	ber of	Bedr 4+	ooms Unknown	Total	Social Rented	Not known	1	Num 2	ber of		ooms Unknown	Tota
Houses			_		ļ · ·	OTHER DEVI	а	Houses			<u> </u>		ļ · ·	OTHER DEVI	а
Flats and maisonettes							Ь	Flats and maisonettes							Ь
Live-work units							С	Live-work units							С
Cluster flats							d	Cluster flats							d
Sheltered housing							е	Sheltered housing							е
Bedsit/studios							f	Bedsit/studios							f
Unknown type							g	Unknown type							g
• •	T	otals	(a + b) + <i>c</i> +	d + e	+f+g)=	В		T	otals	s (a + b) + <i>c</i> +	d + e	+f+g)=	F
Intermediate	Not known	1	Num 2	ber of		ooms Unknown	Total	Intermediate	Not known	1	Num 2	ber of		ooms Unknown	Tota
Houses							а	Houses							а
Flats and maisonettes							Ь	Flats and maisonettes							Ь
Live-work units							С	Live-work units							C
Cluster flats							d	Cluster flats							d
Sheltered housing							е	Sheltered housing							е
Bedsit/studios							f	Bedsit/studios							f
Unknown type							g	Unknown type							9
	T	otals	(a + l) + <i>c</i> +	d + e	+ f + g) =	C		T	otal	s (a + b) + <i>c</i> +	d + e	+ f + g) =	G
			Nives	h a u a 4	Dadu	ooms	Total				Nicona	h a u a 4	Dadu	ooms	Tota
Key worker	Not known	1	2	3	4+	Unknown	_	Key worker	Not known	1	2	3	4+	Unknown	
Houses							а	Houses							а
Flats and maisonettes							Ь	Flats and maisonettes							Ь
Live-work units							С	Live-work units							С
Cluster flats							d	Cluster flats							d
Sheltered housing							е	Sheltered housing							е
Bedsit/studios							f	Bedsit/studios							f
Unknown type							g	Unknown type							g
	Т	otals	(a + b) + c +	d + e	+ f + g) =	D		Т	otal	(a + b) + c +	d + e	+ f + g) =	Н

Shops		ur proposal involve the l						Yes	No	
Shops	If you	u have answered Yes to t								
Net tradable area:	Use class/type of use		Not applicable	Existing gross internal floorspace (square metres)	to be lost by use or der	to be lost by change of use or demolition		e proposed g change of	internal floorspace following developmen	
A2 Financial and professional services	A1	Shops								
Ad prinking establishments		Net tradable area:								
A3 Restaurants and cafes	A2	Financial and professional services								
A5 Hot food takeaways	А3	·								
Bi (a) Office (other than A2)	A4	Drinking establishment	s 🗌							
Bit (b)	A5	Hot food takeaways								
Bell (c) Light industrial	B1 (a)	Office (other than A2)								
Bil (c) Light industrial	B1 (b)									
B8 Storage or distribution	B1 (c)	•								
C1 Hotels and halls of residence C2 Residential institutions D1 Non-residential institutions D2 Assembly and leisure D3THER D4 Please specify Total D5 Type of use alphicable of use or demolition D5 Residential institutions D6 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D7 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition of use or demolition D8 Type of use alphicable of use or demolition D8 Type of use alphicable of use or demolition of	B2	General industrial								
C2 Residential institutions	B8	Storage or distribution								
C2 Residential institutions D3 Non-residential D4 Non-residential D5 Non-residential D6 Non-residential D7 Non-residential D7 Non-residential D8 Non-residential D8 Non-residential D9 N	C1									
Assembly and leisure	C2									
Assembly and leisure	D1									
Please pecify Total In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Type of use applicable class of use of use of use or demolition Type of use applicable of use or demolition Type of use applicable of use or demolition Total rooms proposed (including Net additional rooms) Net additional rooms Net additional rooms Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees Proposed employees Proposed employees O. Hours of Opening 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	D2									
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Type of use applicable of use or demolition Capplicable or demoliticable or demoliticabl	OTHER									
Total	Please Specify									
Type of use applicable of use or demolition or changes of use) Net additional rooms Residential institutions of use or demolition of use or demolition of use or demolition or use or	эрсспу	Total								
Type of use applicable of use or demolition or changes of use) Net additional rooms Residential institutions of use or demolition of use or demolition of use or demolition or use or	In add	dition, for hotels, resider	itial ins	stitutions and hos	tels, please ad	ditionally inc	dicate the lo	ss or gain of	rooms	
Residential Institutions	Use class	Type of use Not applicable		ing rooms to be lo	ost by change	Total room	s proposed	(including		
Institutions										
P. Employment lease complete the following information regarding employees: Full-time										
P. Employment lease complete the following information regarding employees: Full-time	OTHER									
lease complete the following information regarding employees: Full-time	Please Specify									
Full-time Part-time Total full-time equivalent Existing employees Proposed employees O. Hours of Opening 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 Not known	9. Em	ployment								
Existing employees Proposed employees O. Hours of Opening Known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Saturday Saturday Saturday Sunday and Bank Holidays Not known Bank Holidays	lease co	omplete the following in	format	tion regarding em	ployees:					
Existing employees Proposed employees O. Hours of Opening 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 Hours of Opening Not known				Full-time	Part	-time				
Nown, 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	Exi	sting employees								
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	Proj	posed employees								
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	0. Ho	urs of Opening								
Bank Hólidays Not known			of oper	ning (e.g. 15:30) fo	or each non-re	sidential use	proposed:			
	Use N						Sunda		Not known	
I. Site Area							Dankin			
1. Site Area										
1. Site Area										
11 DINC 11 CH	1. Site	Area								

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 develo	pment? Yes	No						
If the answer is Yes, please complete the foll	owing table:							
	including engi	acity of the void in neering surcharge cover or restoratic id waste or litres if	and making no on material (or	Maximum annual o throughput in t (or litres if liquid	onnes			
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								
Please provide the maximum annual operat	ional throughput of th	ne following waste	streams:					
Municipal								
Construction, demolition and e								
Commercial and industr	rial							
Hazardous								
If this is a landfill application you will need t planning authority should make clear what	o provide further info information it require	rmation before you s on its website.	ur application can	be determined. Your	waste			
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)	Ethylene oxide (to	onnes)		Phosgene (tonnes)				
Ammonia (tonnes)	Hydrogen cyanide (to	onnes)	Sul	phur dioxide (tonnes)				
Bromine (tonnes)	Liquid oxygen (to	onnes)		Flour (tonnes)				
Chlorine (tonnes)	quid petroleum gas (to	onnes)	Refined	I white sugar (tonnes) $\Big[$				
Other:		Other:						
Amount (tonnes):		Amount (ton	ines):					

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, and that none of the land 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 65(8) of the Act.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)		
	CERTIFICATE OF OWNERSHIP - CERTIFICATE B			
I certify/ The applicant certifies that I ha	velopment Management Procedure) (England) Order 201: ve/the applicant has given the requisite notice to everyone e on, was the owner* and/or agricultural tenant** of any part	lse (as listed below) who, on the day		
* "owner" is a person with a freehold intere	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		
Signed - Applicant	Or signed - Agent:	Date (DD/MM/YYYY)		

24. Ownership Certificates and Agricultural Land Declaration (continued) **CERTIFICATE OF OWNERSHIP - CERTIFICATE C** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. st "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 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served** Address 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): 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 2015 Certificate under Article 14 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* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. stst "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: 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): than 21 days before the date of the application): Or signed - Agent: Date (DD/MM/YYYY): Signed - Applicant:

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 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 correct fee:

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 the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):

26. Declaration				
I/we hereby apply for planning permission/consinformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.				
Signed - Applicant:	Or signed - Agent:		Date (DD	/MM/YYYY):
	·			(date cannot be pre-application)
27. Applicant Contact Details		28. Agent Con	tact Details	
Telephone numbers		Telephone numbe	rs	
Country code: National number:	Extension number:	Country code: N	lational number:	Extension number:
Country code: Mobile number (optional):		Country code: N	Mobile number (opt	ional):
Country code: Fax number (optional):		Country code: F	ax number (option	al):
Email address (optional):		Email address (opt	ional):	
29. Site Visit				
Can the site be seen from a public road, public fo	ootpath, bridleway or	other public land?	Yes	No
If the planning authority needs to make an appoout a site visit, whom should they contact? (Please	intment to carry se 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	r:	

Email address: