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Application for Planning Permission. Town and Country Planning Act 1990

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:



Proud 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

Publication of applications on 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.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applic	ant Name and Address	2. Agent Name and Address				
Title:	MIL & MILS First name:	Title: MR First name: STJART				
Last name:	RICHARDSON	Last name: WOODALL				
Company (optional):		(optional): CILEEN SWALLON NOCHT UMTTED				
Unit:	House House suffix:	Unit: House House suffix:				
House name:	FLEMING HALL	name: % MITCHEUS AUCTION LOWRANM LIP				
Address 1:		Address 1:				
Address 2:		Address 2: WELEND ALVULUTURAL LENTICE				
Address 3:		Address 3:				
Town:	LOSFORTH	Town: LOCKERMOUTH				
County:		County:				
Country:		Country:				
Postoode:	CAZO IAD	Postcode: CA13 DQQ				
		Version 2018.1				

3. Description of the Proposal Please describe the proposed development, including any change	e of use:
INFILL OF COVERED FAR	
Has the building, work or change of use already started?	X 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 or change of use was completed: (DD/MM/YYYY):	Yes No (date must be pre-application submission)
Reference no. of permission in principle being relied on (technical details consent applications only):	
4. Site Address Details Please provide the full postal address of the application site. Unit: House number: Suffix: House Suffix: name: FLEMINL HALL Address 1: Address 2: Address 3: Image: CA20 IAD Postcode CA20 IAD Description of location or a grid reference. Image: Northing: Description: Northing:	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: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?

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6 Bedestrian and Vahiela Assess Bas		ate of Way	7 Wasta Starage and Collection		
6. Pedestrian and Vehicle Access, Roa	us anu riyi	its of way	7. Waste Storage and Collection		
is a new or altered vehicle access proposed to or from the public highway?	Yes	No 🛛	Do the plans incorporate areas to store and aid the collection of waste?	Yes	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?	Yes	No No			
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	No No			
Do the proposals require any diversions			lleve emergements been mode		
/extinguishments and/or creation of rights of way?	Yes	No 🔀	Have arrangements been made for the separate storage and collection of recyclable waste?	Yes	₩N0
If you answered Yes to any of the above que details on your plans/drawings and state th (s)/drawings(s)	estions, pleas e reference o	se show of the plan	If Yes, please provide details:		
(<i>v)</i> , 3 , 4 , 1 , 9 , (0)					
8. Authority Employee / Member It is an important principle of decision-makin	na that the p		and transparent. For the purposes of this a	usetion traini	ad to!
means related, by birth or otherwise, closely conclude that there was blas on the part of t	enough that	a fair-minde	d and informed observer, having considered	the facts, wo	uld
Do any of the following statements apply to			res No With respect to the author	rity i am-	
	,		(a) a member of staff	iity, i a iii.	
			(b) an elected member (c) related to a member of	f staff	
			(d) related to an elected m	nember	
If Yes, please provide details of their name, re	ole and how	you are relat	ed to them.		

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls		LOMMULATED WANT		
Roof		LOMULATED METAL SHEET		
Windows			Ø	
Doors			Ŕ	
Boundary treatments (e.g. fences, walls)			Ø	
/ehicle acce ss and hard-standing			R	
ighting			R	
thers blease specify)			P	
e you supplying additi Yes, please state refere	onal information on submitted plan(s)/drawing(s nces for the plan(s)/drawing(s)/design and access)/design and access statement? Yes		No

10. Vehicle Parking

I

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

...

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Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference
Cars	NIA		in spaces
light goods vehicles/ public carrier vehicles	NIP		
Motorcycles		1	
Disability spaces			
Cycle spaces			(8-
Other (e.g. Bus)			
Other (e.g. Bus)			

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's riood map showing nood zones z and 5 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 X 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 plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes Xo
	How will surface water be disposed of?
A/4	Sustainable drainage system Kexisting 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	FARM
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)?
b) Designated sites, important habitats or other biodiversity	DD/MM/YYYY (date where known may be approximate)
features: Yes, on the development site	Does the proposal involve any of the following? 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 X No
Yes, on the development site Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable
No	to the presence of contamination? Yes X No
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes X 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 proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as partYesNo	
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	
design, demolition and construction - Recommendations'.	Version 2018.1

17. Residential	Units (Including	a Conversion)
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Vae	
YAR	

Does your proposal in If Yes, please complete	clude th e details	e gai of th	n, loss e chai	or ch nges i	ange n the	tables be	ow:	tial units? Yes	N N						
	Propos	ed H	lous	ing					Existing Housing						
Market Housing	Not	1	Numb 2	er of		ooms Unknown	Total	Market Housing	Not known	1	Num 2	ber of 3		oom s Unknown	Total
Houses			_				8	Houses							a
FlatsXmaisonettes							b	Flats/maisonettes							b
Sheltered housing							C	Sheltered housing							C
Bedsit/studios							ď	Bedsit/studios							đ
Cluster flats							e.	Cluster flats							g
Other							a de la compañía de	Other							Í
	\	Tot	als (a	+ b +	c + d	+ e + f) =	A			To	tals (a	a + b +	c + d	+ e + f) =	F
Social, Affordable	Ň. I		Num	per of	Bedr	ooms	Total	Social, Affordable	Net		Num	ber of	Bedr	ooms	Total
or Intermediate Rent	Not known	1	2	3	4+	Unknown		or Intermediate Rent	Not known	1	2	3	4+	Unknown	
Houses							ā	Houses							а
Flats/maisonettes		/					5	Flats/maisonettes							b
Sheltered housing		,				-	C	Sheltered housing							G
Bedsit/studios							đ	Bedsit/studios							đ
Cluster flats							в	Cluster flats						NH	8
Other							ť	Other							No.
		То	tals (a	a + b +	+ 6 + 0	d + e + f) =	8			Tot	t ais (a	1+0+	c + d	+ 0 + f) =	Q
Affordable Home Ownership	Not	1	Num	ber of	i Bedi	ooms Nnknowi	Total	Affordable Home Ownership	Not known		Num	ber of		ooms Unknown	Total
Houses			-		†		3	Houses							đ
Flats/maisonettes							0	Flats/maisonettes							ð
Sheltered housing						and the state	0	Sheltered housing							ß
Bedsit/studios					15		à	Bedsit/studios							đ
Cluster flats				L.	6		В	Cluster flats							ß
Other						1. A. A.	1	Other							f
		То	tals (a + b -	+ C + (d + 0 + f) =	C	$Totals (a + b + c + d + \theta + 1) =$				H			
	Not		Num	ber o	Bed	rooms	Total	Starter Homes	Not		Num	ber of		ooms	Total
Starter Homes	known	1	2	3	4+	Unknow			known	1	2	3	4+	Unknown	
Houses					-	1	a	Houses							a
Flats/maisonettes				-			b	Flats/maisonettes							D
Bedsit/studios				-			tî A	Bedsit/studios	\mathbb{R}						c đ
Other		<u> </u>		otolo	19 1 1) + c + d) =	Cl ()	Other		Ļ		tele /	(a + h	+ c + d) =	1
4		-								\rightarrow					Total
Self Build and Custom Build	Not known	1	Num 2	ber o		rooms Unknow	Total n	Self Build and Custom Build	Not known	1	Num R	Ber of		ooms Unknown	
Houses						r.	à	Houses							3
Flats/maisonettes							Ù	Flats/maisonettes							ħ
Bedsit/studios							С	Bedsit/studios					\square		¢
Other							đ	Other						<u> </u>	đ
			T	otals	(a + L) + c + d) =	E				Т	otals	(a + b	+ c + d) =	J
	3						~ 4	the state of the							
Total proposed rea	sidentia	l uni	ts (/	A + B -	+ C +	D + E) =		Total existing r	esidenti	al un	its	(F + G	+ H +	· + J) =	\backslash

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	18. All Types of Development: Non-residential Floorspace							
				in or change of u				₫ No
	e class/type		Not applicable	Existing gross internal floorspace (square metres)	Gross Internal to be lost by a use or dem (square m	floorspace change of colltion	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	She	ops		1				
		able area:						
A2	Financ profession	ial and al services	\Box			L. L.		
A3	Restaurant	s and cafes						
A4	Drinking est	ablishments						
A5	Hot food f	takeaways						
B1 (a)		er than A2)						
B1 (b)		ch and pment					С.)- С	
B1 (c)	Light in	dustrial						
B2	General	industrial						
B8		distribution						
C1		id halls of ence						
C2		institutions						
D1		sidential utions						
D2		and leisure						
OTHER		86. ⁴ 2.			аланан (Ш. 1999) 19	1.4		
Please Specify	1 ¹							
opoony	To	tal		7 V				
In add	dition, for ho	tels, resident	tial in	stitutions and ho	stels, please ad	ditionally in	dicate the loss or gain of	rooms
01000		Not applicable	Exist	ing rooms to be of use or dem	lost by change olition	Total roon C	ns proposed (including hanges of use)	Net additional rooms
C1	Hotels Residential							
C2	Institutions							
OTHER								n - 0
Please Specify	ια χ ^{ει} τ							
19. Employment Please complete the following information regarding employees:								
				Full-time	Part-time			al full-time quivalent
Exi	isting employ	yees	55	3			Э	
Pro	posed emplo)yees	1.1					
20. Hours of Opening If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed:								
	Use			y to Friday	Saturda		Sunday and Bank Holidays	Not known
								1 1 1
			1					
21. Site				Γ				
Please st	ate the site a	rea in hectar	es (ha	a) [0.0004			-	

22. Industrial or Commercial Proce	SSOS	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	•						
If the answer is Yes, please complete the foll) table:					
	Not applicable	The total capacity of the void in c including engineering surcharge a allowance for cover or restoration tonnes if solid waste or litres if li	nd making no n material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)			
Inert landfill							
Non-hazardous landfill				n de State			
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant							
Pyrolysis/gasification							
Metal recycling site							
Transfer stations	Ď						
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites							
Open windrow composting							
In-vessel composting							
Anaerobic digestion				x			
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works							
Other treatment							
Recycling facilities construction, demolition and excavation waste							
Storage of waste		8 × 4					
Other waste management							
Other developments							
Please provide the maximum annual operat	ional	throughput of the following waste s	streams:				
Municipal							
Construction, demolition and e		ation	1				
Commercial and Indust	rial						
Hazardous				he determined. Very weets			
If this is a landfill application you will need t planning authority should make clear what	o pro Infor	nation it requires on its website.	r application car	i de determined. Your waste			
23. Hazardous Substances							
Does the proposal involve the use or storage	e of a	ny of		ble			
the following materials in the quantities stat	-		Not applica				
If Yes, please provide the amount of each su							
Acrylonitrile (tonnes) Ethylene oxide (tonnes) Phosgene (tonnes)							
Ammonia (tonnes) Hydrogen cyanide (tonnes) Sulphur dioxide (tonnes)							
Bromine (tonnes) Flour (tonnes) Flour (tonnes)							
Chlorine (tonnes)	quid	petroleum gas (tonnes)	Refined	d white sugar (tonnes)			
Other:		Other:					
Amount (tonnes):		Amount (toni	nes):	1			
The second s				Version 2018.1			

24. Ownership Certificates and	Agricultural Land Declaration	
One Certi	icate A, B, C, or D, must be completed with this application form	1
Town and Country Planning (De	CERTIFICATE OF OWNERSHIP - CERTIFICATE A velopment Management Procedure) (England) Order 2015 Cert	ificate under Article 14
I certify/The applicant certifies that on th	e day 21 days before the date of this application nobody except my to which the application relates, and that none of the land to whic	self/ the applicant was the
NOTE: You should sign Certificate B, C application relates but the land is, or is	or D, as appropriate, if you are the sole owner of the land or bui part of, an agricultural holding.	iding 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 65	(8) of the Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
I certify/ The applicant certifies that I ha 21 days before the date of this application application relates. ""owner" is a person with a freehold intere	velopment Management Procedure) (England) Order 2015 Certi ve/the applicant has given the requisite notice to everyone else (as on, was the owner [*] and/or agricultural tenant ^{**} of any part of the st or leasehold interest with at least 7 years left to run. liven in section 65(8) of the Town and Country Planning Act 1990	listed below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
SELLAFIELD LTD	AVINSON YOURS - WESTINKES SLIENCE POLIC	11/10/23
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		11/10/23

24. Ownership Certificates and A Town and Country Planning (Dev I certify/ The applicant certifies that: • Neither Certificate A or B can be • All reasonable steps have been to the land or building, or of a part of * "owner" is a person with a freehold interest ** "agricultural tenant" has the meaning of The steps taken were:	CERTIFICAT velopment Man issued for this ap aken to find out of it, but I have/ at or leasehold int	E OF OWNERSHIP - CERT agement Procedure) (Eng oplication the names and addresses of the applicant has been una terest with at least 7 years lei	IFICATE C gland) Order 2015 Certificate of the other owners* and/or ag able to do so. <i>ft to run.</i>	
Name of Owner / Agricultural Tenant	\prec	Address		Date Notice Served
			<u>\</u>	
Notice of the application has been public (circulating in the area where the land is	shed in the follo situated):	wing newspaper	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
Town and Country Planning (Dev I certify/ The applicant certifies that: • Certificate A cannot be issued for • All reasonable steps have been to date of this application, was the of have/ the applicant has been una * "owner" is a person with a freehold interes ** "agricultural tenant" has the meaning pho- The steps taken were:	this application this application then to find out there and/or a the to be so. t or leasehold int	the names and addresses o gricultural tenant** of any erest with at least 7 years left	land) Order 2015 Certificate f everyone else who, on the day part of the land to which this a t to run.	/ 21 days before the
			<	
Notice of the application has been publis (circulating in the area where the land is s		ving newspaper	On the following date (which than 21 days before the date	n must not be earlier of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):

25. Planning Application Requirements - Checklist					
the Local Planning Authority (LPA) has been submitted.	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by				
The original and 3 copies* of a completed and dated application form:	The correct fee:				
The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an	if required (see help text and guidance notes for details):				
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:	Ownership Certificate (A, B, C or D – as applicable)				
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pla	y or, the LPA indicate that a smaller number of copies is required.				
26. Declaration					
l/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):				
	11/10/23 (date cannot be pre-application)				
27. Applicant Contact Details	28. Agent Contact Details				
Telephone numbers					
Telephone numbers Country code: National number: Extension number:	Telephone numbers Country code: National number: Extension number:				
Extension	Telephone numbers Extension				
Country code: National number: Extension number:	Telephone numbers Country code: National number:				
Country code: National number: Extension number: Country code: Mobile number (optional):	Telephone numbers Extension Country code: National number: Country code: Mobile number (optional):				
Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional):	Telephone numbers Extension Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Extension Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Extension Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Country code: Country code: Fax number (optional): Country code:<	Telephone numbers Extension Country code: National number: number: Country code: Mobile number (optional): number: Country code: Fax number (optional): number: Country code: Fax number (optional): number: Email address (optional): number: number: Email address (optional): number: number: Value: Yes No No Agent Applicant Other (if different from the form t				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): Image: Country code: Fax number (optional): <	Telephone numbers Extension number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Country code: Country code: Fax number (optional): Email address (optional): Country code: Can the site be seen from a public road, public footpath, bridleway country country country code: If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Extension Country code: National number: number: Country code: Mobile number (optional): number: Country code: Fax number (optional): number: Country code: Fax number (optional): number: Email address (optional): number: number: Email address (optional): number: number: Value: Yes No No Agent Applicant Other (if different from the form t				
Country code: National number: number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): Image: Country code: Fax number (optional): <	Telephone numbers Extension number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):				