

REFUSE



Civic Offices
Havant

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

Title:	MISS	First name:	LINDA
Last name:	SMITH.		
Company (optional):			
Unit:		House number:	40
		House suffix:	
House name:			
Address 1:	STAKES HILL ROAD		
Address 2:			
Address 3:			
Town:	WATERLOOVILLE		
County:	HANTS		
Country:			
Postcode:	PO7 7HY		

2. Agent Name and Address

Title:		First name:	
Last name:			
Company (optional):			
Unit:		House number:	
		House suffix:	
House name:			
Address 1:			
Address 2:	HAVANT BOROUGH COUNCIL		
Address 3:	DEVELOPMENT CONTROL		
Town:	27 OCT 2010		
County:	RECEIVED		
Country:			
Postcode:			

3. Description of the Proposal

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

change of use of 3 rooms of my house
- i.e. lounge, kitchen and downstairs toilet.
FROM 9-3pm, MONDAY TO FRIDAY, TO RUN
A DAY CARE SERVICE FOR OLDER PEOPLE.
UP TO 14 PEOPLE.

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?

☐ Yes

☒ No

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

10 / 01 / 2011

(date must be pre-application submission)

9. Materials

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

	Existing (Not applicable)	Proposed	Not applicable	Don't know
Roof			☐	☐
Walls			☐	☐
Windows			☐	☐
Doors			☐	☐
External cladding			☐	☐
Ground floor			☐	☐
First floor			☐	☐
Second floor			☐	☐
Roofing			☐	☐
Other			☐	☐

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Applicant's declaration: I declare that the information provided in this application is true and correct to the best of my knowledge and belief.

10. Vehicle Parking

Please provide details of any proposed vehicle parking spaces, including the number of spaces and the location of each space.

Type of vehicle	Total Existing	Total proposed including existing spaces	Difference in spaces
Car	x2		
Motorcycle			
Other (e.g. bus)			
Other (e.g. van)			
Other (e.g. truck)			
Other (e.g. car)			

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:

Use class type of use	Is it planned?	Existing gross internal floor space (square metres)	Gross internal floorspace proposed by change of use or change of use (square metres)	Total gross internal floorspace proposed (including change of use) (square metres)	Net additional gross internal floorspace following development (square metres)
A1 Shops	☐				
A2 Food and drink areas	☐				
A3 Financial and professional services	☐				
A4 Restaurants and cafes	☐				
A5 Drinking establishments	☐				
A6 Hot food takeaways	☐				
B1a Office (excluding B1b)	☐				
B1b Research and development	☐				
B2 Light industrial	☐				
B3 General industrial	☐				
B4 Wholesale storage or distribution	☐				
C1 Retail (excluding C2)	☐				
C2 Food and drink retail	☐				
C3 Retail (excluding C2)	☐				
C4 Advertising and display	☐				
D1 Cinema	☐				
D2 Theatre	☐				
D3 Other	☐				
E1 Total					



For completion by the applicant, please provide details of any proposed changes to the internal floor space of the building.

Use class	Proposed change of use	Existing gross internal floor space (square metres)	Proposed gross internal floor space (square metres)	Net additional floor space (square metres)
A1	Shops			
A2	Food and drink areas			
A3	Financial and professional services			
A4	Restaurants and cafes			
A5	Drinking establishments			
A6	Hot food takeaways			
B1a	Office (excluding B1b)			
B1b	Research and development			
B2	Light industrial			
B3	General industrial			
B4	Wholesale storage or distribution			
C1	Retail (excluding C2)			
C2	Food and drink retail			
C3	Retail (excluding C2)			
C4	Advertising and display			
D1	Cinema			
D2	Theatre			
D3	Other			
E1	Total			

19. Employment

Please provide details of any proposed employment floorspace.

Use class	Proposed change of use	Existing gross internal floor space (square metres)	Proposed gross internal floor space (square metres)	Total floorspace equivalent
A1	Shops			
A2	Food and drink areas			
A3	Financial and professional services			
A4	Restaurants and cafes			
A5	Drinking establishments			
A6	Hot food takeaways			
B1a	Office (excluding B1b)			
B1b	Research and development			
B2	Light industrial			
B3	General industrial			
B4	Wholesale storage or distribution			
C1	Retail (excluding C2)			
C2	Food and drink retail			
C3	Retail (excluding C2)			
C4	Advertising and display			
D1	Cinema			
D2	Theatre			
D3	Other			
E1	Total			

20. Hours of Opening

Please provide the hours of opening for each proposed use of the building.

Use class	Monday to Friday	Saturday	Sunday and Bank Holidays	Notes
DAY CARE	9-3			

21. Site Area

Please provide details of any proposed changes to the site area.

N/A. 3x internal room

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

Market Housing	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Social Rented	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Intermediate	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Key worker	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

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

Existing Housing

Market Housing	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Social Rented	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Intermediate	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Key worker	Not Known	Number of Bedrooms				Total
		1	2	3	4+ Unknown	
Flats	☐					
Flats and maisonettes	☐					
One-bed units	☐					
Cluster flats	☐					
Sheltered housing	☐					
Bedsit studios	☐					
Unknown type	☐					
Totals (a-b-c-d-e-f-g) =						

Total existing residential units (E+F+G+H) =

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

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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 paint, ventilation or air conditioning). Please include the type of machinery which may be installed on site.

Is the organization's waste management developed? ☐ Yes ☒ No

If the answer is not, please complete the following table:

	Waste code	The total capacity of the void in cubic metres, including engineering and other void making no allowance for access or other material for the use of solid waste, whether by, or for, any	Maximum annual operational throughput in tonnes (or litres if liquid waste)
Landfill			
Non-hazardous landfill	☐		
Hazardous landfill	☐		
Energy from waste incineration	☐		
Other incineration	☐		
Landfill gas generation plant	☐		
Pyrolysis/gasification	☐		
Material recycling site	☐		
Transfer plants	☐		
Material recovery, sorting, finishing, etc.	☐		
Bioreactors and anaerobic sites	☐		
Open-air composting	☐		
Bioreactors	☐		
Aerobic digestion	☐		
Thermal treatment and chemical or other biological treatment	☐		
Storage of materials	☐		
Other treatment	☐		
Receiving facilities for waste, including waste transfer stations	☐		
Storage of waste	☐		
Construction and demolition	☐		
Other	☐		

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23. Hazardous Substances

10. The respondent is a member of the respondent's
 11. The respondent is a member of the respondent's

24. Ownership Certificates

One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form
CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12
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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

Signature:  Or signed - Agent:  Date (DD/MM/YYYY): 18-10-10

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12
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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which this application relates.

Name of Owner	Address	Date Notice Served

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Signed - Applicant:  Or signed - Agent:  Date (DD/MM/YYYY): 

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

The steps taken were:

Name of Owner	Address	Date Notice Served

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:  Or signed - Agent:  Date (DD/MM/YYYY): 

27. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

18.10.10

(date cannot be pre-application)

28. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

[Redacted contact details for Applicant]

29. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

[Redacted contact details for Agent]

Country code: Mobile number (optional):

[Redacted contact details for Agent]

Country code: Fax number (optional):

[Redacted contact details for Agent]

Email address (optional):

[Redacted contact details for Agent]

30. 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)

☐ Agent

☒ Applicant

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

If Other has been selected, please provide:

Contact name:

HINDA SMITH

Telephone number:

[Redacted telephone number]

Email address:

[Redacted email address]

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