

Development Control

PO BOX 8045 Burton upon Trent DE14 9JG

dcsupport@eaststaffsbc.gov.uk



01283 508606

Application for Outline Planning Permission with all matters reserved. Town and Country Planning Act 1990 P/2016/00980

Please note that the information provided on this application form and in supporting documents may be published or If you require any further clarification, please context the Australia and the context th If you require any further clarification, please contact the Authority's planning department.

Title:	First Name:	Surname: Wyggeston Hospital
Company name:	Wyggeston Hospital	
Street address:	c/o Agent	
		Telephone number:
		Mobile number:
Town/City:		Fax number:
Country:	United Kingdom	Email address:
Postcode:		
Are you an agent	t acting on behalf of the applicant?	Yes No
2. Agent Nam	e, Address and Contact Details	
Title: Mr	First Name: Chris	Surname: Green
Company name:	Andrew Granger & Co	
Street address:	Phoenix House, 52 High Street	
		Telephone number:
	Market Harborough	Mobile number:
Town/City:	Leicestershire	Fax number:
Country:	United Kingdom	Email address:
Postcode:	LE16 7AF	
3. Description	n of the Proposal	
Please describe the		
	 2.2 Harbury Street and existing structures and nission of P/2014/01353) 	nd the erection of up to fourteen (14) new residential dwellings with replacement parking
	or works already been carried out?	○ Yes ◎ No
Has the bullance of	of Works alleady been carried out:	U res w ino

4. Site Addres	ss Details								
Full postal addre	ess of the site (including t	ull postcode	where available)	Description:					
House:	s	Suffix:							
House name:	Land rear of								
Street address:	2 Harbury Street								
	Staffordshire								
Town/City:									
Postcode:	DE13 0RX								
	ocation or a grid referenc eted if postcode is not kn								
Easting:	423534								
Northing:	324788								
5. Assessme	nt of Flood Risk								
	an area at risk of floodin nd 3 and consult Environi								
	r information as necessar		standing advice	and your local planin	rig authority		Yes	No	
If Yes, you will n	eed to submit an approp	riate flood ris	k assessment to	consider the risk to the	he proposed si	te.			
Is your proposal	within 20 metres of a wa	itercourse (e.	g. river, stream of	or beck)?			Yes	No	
Will the proposa	I increase the flood risk e	lsewhere?					Yes	No	
How will surface	e water be disposed of?								
Sustainable	e drainage system	~	Main sewer		Pon	d/lake			
Soakaway			Existing waterco	ourse					
6. Pre-applica	ation Advice								
o. i ic-applica	ation Advice								
Has assistance	or prior advice been sou	ght from the I	ocal authority ab	out this application?		Yes	No		
If Yes, please co	omplete the following info	rmation abou	ut the advice you	were given (this will	help the author	ity to deal with	this applica	tion more effic	ciently):
Officer name:	-		•		·				
Title:	First name:	Christina			Surname:	Farrer			
Reference:	QU/2015/ENQ/0	327							
Date (DD/MM/Y)			ore-application su	ıhmission)					
	e-application advice rece		no application of	201111301011)					
	nption in favour of develo								
7 Authority F	Employee/Member								
unionty L	p.o., co/moniber								
	the Authority, I am:								
	nember of staff elected member		Do any of	these statements ap	ply to you?		Yes	No	
` '	ated to a member of staff ated to an elected member	ər	-						
(-)									

8. Site Area											
What is the site area?		3,720	0.57		sq.metres						
9. Residential Units											
Does your proposal inclu	de the ga	ain or los	ss of res	idential	units?				Yes	○ N	lo
Market Housing - Propose	d					Market Housing - Existing					
		Nun	nber of be	drooms				Nun	ber of be	drooms	
	1	2	3	4+	Unknown		1	2	3	4+	Unknown
Bedsits/Studios						Bedsits/Studios					
Cluster Flats						Cluster Flats					
Flats/Maisonettes						Flats/Maisonettes					
Houses	0	0	0	0	14	Houses					
Live-Work Units						Live-Work Units					
Sheltered Housing						Sheltered Housing					
Unknown						Unknown					
Proposed Market Housing T	otal		14			Existing Market Housing Total	al				
Social Rented Housing - P	ronosod					Social Rented Housing - Ex	rietina				
Social Relited Housing - P	Toposeu	Nun	nber of be	drooms		Social Refiled Housing - Ex	listing	Nun	nber of be	drooms	_
	1	2	3	4+	Unknown		1	2	3	4+	Unknown
Bedsits/Studios	 	_		<u> </u>		Bedsits/Studios	1	-			
Cluster Flats						Cluster Flats	-				
Flats/Maisonettes						Flats/Maisonettes	+				+
Houses						Houses					
Live-Work Units					+	Live-Work Units	-				
Sheltered Housing						Sheltered Housing					-
Unknown						Unknown					
CHICIOWIT						Officiowii					
Proposed Social Housing To	otal					Existing Social Housing Total					
Intermediate Housing - Pr	oposed					Intermediate Housing - Exis	sting				
		Nun	nber of be	drooms				Nun	ber of be	drooms	_
	1	2	3	4+	Unknown		1	2	3	4+	Unknown
Bedsits/Studios						Bedsits/Studios					
Cluster Flats						Cluster Flats					
Flats/Maisonettes	1					Flats/Maisonettes					
Houses	1					Houses					
Live-Work Units						Live-Work Units					
Sheltered Housing	1					Sheltered Housing					1
Unknown						Unknown					
Proposed Intermediate House	sing Total	-		-		Existing Intermediate Housing	g Total	-	<u>'</u>	-	1
											_
Key Worker Housing - Pro	posed					Key Worker Housing - Exis	ting				
	1		nber of be	1	Halassiii		4		nber of be		Halas
Bedsits/Studios	1	2	3	4+	Unknown	Bedsits/Studios	1	2	3	4+	Unknown
Cluster Flats	-				+	Cluster Flats					-
	-						-	-			-
Flats/Maisonettes	-					Flats/Maisonettes	-				-
Houses	-					Houses					
Live-Work Units	-					Live-Work Units					-
Sheltered Housing Unknown	-					Sheltered Housing					-
						Unknown	1				1

9. Residential Units					
Proposed Key Worker Housing Total		Existing Key Worker Housing Total			
Overall Residential Unit Totals					
Total proposed residential units 1	4				
Total existing residential units 1					
10. All Types of Development:	Non-residential Floorsnace	1			
To. All Types of Development.	Non-residential r loorspace	•			
Does your proposal involve the loss, g	ain or change of use of non-residen	ntial floorspace?	Yes	No	
11. Employment					
No Employment details were submitted	d for this application				
12. Hours of Opening					
No Hours of Opening details were subr	mitted for this application				
13. Industrial or Commercial P	Processes and Machinery				
Please include the type of machinery v		on the site and the end products including	plant, ventilation	n or air conditior	ning.
N/A					
Is the proposal for a waste manageme	ent development?	○ Yes ● No			
If this is a landfill application you will no make clear what information it requires	eed to provide further information be s on its website.	efore your application can be determined.	Your waste plai	nning authority s	should
14. Existing Use					
Please describe the current use of the	site:				
Single residential dwelling, garages a					
Is the site currently vacant?			O Yes	No	
Does the proposal involve any of the fo	ollowing?				
If yes, you will need to submit an appro		with your application.			
Land which is known to be contaminat	red?		Yes	No	
Land where contamination is suspecte	ed for all or part of the site?		Yes	No	
A proposed use that would be particula	arly vulnerable to the presence of co	ontamination?	Yes	No	
15. Site Visit					
Can the site be seen from a public roa	id, public footpath, bridleway or othe	er public land?	No		
•		visit, whom should they contact? (Please	select only one)	
The agent		, mon onound they contact: (Hease	Sold of the office	,	

16. Certificates ((Certificate A	.)						
	Town and Cou		ertificate of Ownership - Cert nt Management Procedure) (E		· 2015 Certificate	under Arti	icle 14	
freehold interest or leas	sehold interest wit	h at least 7 years left to run)	te of this application nobody exo of any part of the land to which has the meaning given by refere	n the application	relates, and that r	none of the	e land to which the application	
Title: Mr	First name:	Christopher		Surname:	Green			
Person role:	con role: AGENT Declaration date:			12/0	7/2016	✓ Declaration made		
17. Declaration								
I/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. Date								