Worthing BOROUGH COUNCIL MAK

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App WB/07/1341/FUL
Date Rc. 29.10.07
Fee £265.00 cq
Rec. No 2241/27265

Town and Country Planning Act 1990

Application for planning permission

Please read the notes before you fill in this form.

Form reference: PA1/2

1 Applicant (in block capitals)

Full name: MR CHRIS HAYHOE

Address (including postcode):
85 ROWLANDS ROAD,
WORTHING,
W. SUSSEX
BN11 3JX

Phone numbers
Home: [redacted]
Work:
Extension:

Agent (if any)

Full name: MARTIN HELYER

Address (including postcode):
2 QUEEN STREET
EMSWORTH
HAMPSHIRE
PO10 7BE

WORTHING BOROUGH COUNCIL
PLANNING SECTION
RECEIVED 29 OCT 2007
REF No.

Phone numbers
Home: [redacted]
Work:
Extension:

2 Please give the address or location of the land this application relates to.

33 LENNOX ROAD,
WORTHING
W. SUSSEX

WORTHING BOROUGH COUNCIL
10 DEC 2007
CONSENT REFUSED

Does the applicant own or control any land next to the site? Yes ☐ No ☑
(If 'Yes', the land must be edged in blue on the location plan.)

Area of site [ ] hectares or [220] square metres

3 Description of the development you are applying for.

CONSTRUCTION OF AN EXTENSION TO THE REAR TO PROVIDE ONE ADDITIONAL UNIT OF RESIDENTIAL ACCOMMODATION

4 Type of application

Are you applying for:

- full planning permission (this includes change of use)? Yes ☑ No ☐
- outline planning permission? Yes ☐ No ☑
- approval of reserved matters? Yes ☐ No ☑

If 'Yes', please give the following details.

Outline application number WB/ Date approved

Do any of the reserved matters being applied for relate to:

siting? Yes ☐ No ☐
design? Yes ☐ No ☐
external appearance? Yes ☐ No ☐
access? Yes ☐ No ☐
landscaping the site? Yes ☐ No ☐

- Do you want to renew temporary permission? Yes ☐ No ☐

  If 'Yes', please give the permission number. WB/

- Do you want to renew an unimplemented permission? Yes ☐ No ☐

  If 'Yes', please give the permission number. WB/

- Do you want to change or remove any conditions on your planning permission? Yes ☐ No ☐

  If 'Yes', please give the permission number. WB/

  Please give the number of the condition.

5 Application details. Are you applying to:

- build new buildings or structures? Yes ☑ No ☐
- alter or extend existing buildings? Yes ☑ No ☐
- build a new vehicle access to a road? Yes ☐ No ☑
- alter an existing vehicle access to a road? Yes ☐ No ☑
- close an existing road access? Yes ☐ No ☑
- change the use of the land or buildings (or both)? Yes ☐ No ☑

If 'Yes', what is the present use of the land or buildings (or both)? If the land or buildings are not used at the moment, what was the last use?

RESIDENTIAL

6 **Other information**

Will any residential units be knocked down or lost as a result of the development? Yes ☐ No ☑

If 'Yes', how many units? ☐

Will any trees be cut down? Yes ☐ No ☑

If 'Yes', please mark their positions on a plan and tell us how many trees will be cut down and what species they are.

How is surface water drained now? SOAKAWAY

How do you plan to drain surface water? SOAKAWAY

How is foul sewage drained now? MAINS SEWER

How do you plan to drain foul sewage? MAINS SEWER

7 Is your application for industrial, office, warehousing, storage, shopping or business purposes, rest or nursing homes, or public meeting places? Yes ☐ No ☑

If 'Yes', you must answer questions 8 to 18.
If 'No', go straight to question 19.

8 If your application relates to an industrial use or development, please give a full description of the industrial operations to be carried out there.

9 Present name and address of the person, group or company who will use the building.

10 Is the development related to an existing use on or near the site? Yes ☐ No ☐

11 Will the development replace existing premises which are no longer needed, no longer suitable or otherwise unsatisfactory? Yes ☐ No ☐

If 'Yes', please give the address of the other premises and floor area.

Floor area ☐ square metres

15 Rest or nursing home

How many bed spaces are there now? ☐

How many new bed spaces will there be? ☐

16 Car parking on the site (Please show details on your plan.)

Number of existing parking spaces ☐

Number of new parking spaces ☐

The total number of parking spaces ☐

17 What is the estimated vehicle traffic flow to and from the site during a normal working day?
(Please include all vehicles, including those used by employees driving to work.)

Employees	Visitors	Deliveries	**Total**
.....	.....	.....	.....

18 Will you be using or storing dangerous materials? (For a full list, please contact the Planning Section.)

Yes ☐ No ☐

If 'Yes', please list the materials and the amounts you will be using or storing.

19 Please number your plans and write the number against the titles here.

	Plan number	Scale
Location plan	07071/01 REV A	1:1250
Block plan	07071/01 REV A	1:100
Floor plan	07071/01 REV A	1:100
Elevations	07071/01 REV A	1:100
Other		

20 Fees

Do you need to pay a fee for this application? (See note 20.) Yes ☐ No ☑

If 'Yes', please say how much you have enclosed. £265

21

Signatu [redacted] **Date:** 25/9/7

Please print your name: MARTIN HELYAR