ADUR DISTRICT COUNCIL

TOWN AND COUNTRY PLANNING ACT, 1990

APPLICATION FOR PLANNING PERMISSION

4 copies of this form required, together with plans and appropriate fee.
All measurements are to be given in metric.

FOR OFFICIAL USE ONLY
Appl. No ADC/0466/06.
Date Received 30-11-06
Fee 130

IT IS IMPORTANT THAT YOU READ THE GUIDANCE NOTES AS INCORRECT COMPLETION INVOLVES DELAY

1. Applicant (In BLOCK CAPITALS)

Name VIGCARE (HOVE) LTD
Address 11 PORTLAND ROAD, HOVE.
Tel. No.

Agent (if any) to whom correspondence should be sent (In BLOCK CAPITALS)

Name JON ANDREWS LTD,
Address CHILCOTE, THREALS LANE, WEST CHILTINGTON, W. SUSSEX RH20 2RF.
Tel. No. 01798 812517.

22 JAN 2007

2. Type of Application (see Note 2)

		State Yes or No
(a)	Full planning permission (including changes of use)	YES
(b)	Outline planning permission	No →
(c)	Renewal of a temporary permission	No
(d)	Permission for retention of building or continuance of use without complying with a condition imposed on a planning permission	No
(e)	Permission to develop land without complying with a condition imposed on a planning permission.	No

If yes, state those matters to which this application relates (tick where appropriate)

(i)	Siting	☐
(ii)	Design	☐
(iii)	External appearance	☐
(iv)	The means of access	☐
(v)	Landscaping of the site	☐

If yes, state the date and number of the permission and outline the particular condition

Date

Application No.

Condition No.

3. (a) Full address or location of the land to which this application relates

NORMAN LATHAM HOUSE, 283 OLD SHOREHAM ROAD, SOUTHWICK.

(b) State whether applicant owns or controls any adjoining land — State Yes or No: No. — If yes, this land must be edged blue on the location plan

(c) Area of site 0.2 hectares/~~sq. metres~~

Dimensions of the application site and distances from the new buildings to boundaries must be clearly indicated on plans

(d)	Description of proposed development (If residential development, state no. of units proposed and type if known e.g. houses, bungalows, flats)	FIRST FLOOR LINK EXTENSION.

(e) State whether the proposal involves:-

		State Yes or No
(i)	New building(s) or structure(s)	No
(ii)	Alteration or extension of building(s)	YES
(iii)	Construction of a new) vehicular access to a highway) pedestrian	No / No
(iv)	Alteration of an existing) vehicular access to a highway) pedestrian	No / No
(v)	Closure of existing access	No
(vi)	Change of use only	No.

4. Particulars of Use of Buildings or Land: state (a) Present use NURSING HOME.
(b) If vacant, the last use "

5. **Additional Information**

		State Yes or No		State Yes or No
(a)	Is the application for industrial, office warehousing, storage, shopping, commercial purposes or places of public assembly? (See note 5)	YES	If yes, complete part 2 of form C.P. 1	YES
(b)	Is the application for the winning or working of minerals?	No	If yes, complete part 4 of form C.P. 1	
(c)	Is the application for an agricutural dwelling or building?	No	If yes, complete part 6 of form C.P. 1	
(d)	Does the proposed development involve the demolition of any residential units?	No	If yes, how many units? Please indicate their position on plans	
(e)	Does the proposed development involve the felling of any trees?	No	If yes, indicate their position on plans	
(f)	Does the proposed development involve any public right of way within the site?	No	If yes, indicate the position on plan	
(g)	Does the proposed development involve demolition or alteration of a building or Special Architectural or Historic interest or demolition within a Conservation Area?	No	If YES a separate application for **Listed Building Consent or Conservation Area Consent** may be necessary.	

(h) (i) How will surface water be disposed of? (i) SOAKAWAYS.
(ii) How will foul sewage be disposed of? (e.g. mains, cesspit, etc.) (ii) MAINS.

6. **Plans (See Note 6). List of drawings and plans submitted as part of the application - indicate drawing numbers and scales.**
4 sets of all drawings are required. Additional copies in respect of major applications will assist in determination of such applications. All measurements are to be given in metric (89/617 EEC Directive)

4x 4197/02.

7. Fees (See Note 7)
If a fee is submitted please give the amount £ 1275-00.

8. I/WE APPLY FOR PLANNING PERMISSION AS DETAILED ABOVE.

DATE 27.11.06. SIGNED [redacted]

on behalf of VIGCARE (HOVE) LTD.
(insert applicant's name if signed by an agent)

9. Certificate under Section 65 of the Town and Country Planning Act. 1990 (Article 7 of the T & CP (General Development Procedure) Order 1995
N.B. A signed certificate MUST accompany this application (See Note 9).
If the applicant is the sole owner (a) the following certificate should be completed and signed.

CERTIFICATE A

1. **Certificate A(a)**
I certify that

on the day 21 days before the date of the accompanying application nobody, except the applicant, was the owner (a) of any part of the land to which the application relates.

(a) Owner means a person having a freehold interest or tenancy the unexpired term of which was not less than 7 years

*2. None of the land to which the application relates is or is part of an agricultural holding.

OR

*3. *I have / The applicant has ——— given requisite notice to every person other than *myself / himself/herself ——— who, on the day 21 days before the date of the application was a tenant of an agricultural holding on all or part of the land to which the application relates, as follows

Name of Tenant	Address at which Notice was served	Date on which Notice was served

*Delete where inappropriate

Signed [redacted]

On behalf of VIGCARE (HOVE) LTD.

Date 27.11.06.

WEST SUSSEX

ADUR DISTRICT COUNCIL

Application No.

(For official use only)

PLANNING APPLICATION FORM PART 2

Additional information required in respect of Applications for Industrial, Office, Warehousing, Storage, Shopping, Rest and Nursing Homes, Commercial Purposes or Places of Public Assembly.
4 copies of this form should be submitted
N.B. Please use GROSS figures only (external measurement). All measurements are to be given in metric (89/617 EEC Directive)

1.	In the case of industrial development, give a description of the processes to be carried on and of the end products, and the type of plant or machinery to be installed. Please relate your answer to question 5 below.	N/A.
2.	Name and address of proposed occupier and type of business	VIGCARE (HOVE) LTD. 283 OLD SHOREHAM RD, SOUTHWICK. (NURSING HOME)
3.	Is the proposal related to an existing use on or near the site? If so, please explain the relationship.	State Yes or No No
4.	Is this a proposal to replace existing premises in this area or elsewhere which have become obsolete, inadequate or otherwise unsatisfactory? If so, please give details including gross floor area of such premises and state your intentions in respect of those premises.	State Yes or No No.

5. Details of floor areas and uses

		Existing Floor Space or use(if any)	Proposed New Floor Space or use	Total Floor Space (allow for any space lost)
(a)	What is the amount of industrial floor space?	(a)..... m^2	..... m^2	..... m^2
(b)	What is the amount of office floor space?	(b)..... m^2	..... m^2	..... m^2
(c)	What is the amount of retail floor space?	(c)..... m^2	..... m^2	..... m^2
(d)	What is the amount of storage or warehousing floor space?	(d)..... m^2	..... m^2	..... m^2
(e)	Other uses(please specify) NURSING HOME	(e) 1175 m^2	11 m^2	1186 m^2
	.....	..... m^2	..... m^2	..... m^2
	TOTALS	1175	11	1186.

6. Staff

		Office Male	Office Female	Industrial Male	Industrial Female	Other Staff Male	Other Staff Female
(a)	Number of staff in existing premises on the site	(a).....		.....		3	15
(b)	How many new staff will be employed on the site as a result of the development?	(b).....		.....		0	0
(c)	If you propose to transfer staff from other premises, please give details of the numbers nvoived and of the premises affected.	(c).....		.....		.....	

P.T.O.

C.P.1(Pt.2)

7.	In the case of restaurants, hotels, public houses, theatres, cinemas, meeting halls, Rest and Nursing Homes, etc. please specify (a) public floor space (Total) (b) seating capacity (c) bar floor area (d) bedrooms as appropriate	(a) N/A. sq.m. (b) N/A (c) N/A. sq.m. (d) 29 single 0 double
8.	What provisions have been made for parking, loading and unloading of vehicles within the curtilage on the site?. (Please show location of such provision on the plans and distinguish between parking for operational needs and other purposes) State number of spaces	EXISTING UNAFFECTED. car..... lorry.....
9.	What is the estimated vehicular traffic flow to the site during a normal working day? (Please include all vehicles but separately specify those used by employees driving to work)	EXISTING UNAFFECTED.
10.	What is the nature, volume and proposed means of disposal of any trade effluents or trade refuse?	ADC. COLLECTIONS.
	HAZARDOUS MATERIALS	State Yes or No
11.	Will the proposed use involve the use or storage of any hazardous substances?	NO. If 'YES' please indicate