

PLANNING APPLICATION FORM

Valid 28 AUG 2007
 No 07/0968
 OFFICE USE ONLY
 Application Number: _____
 Date Received _____ Date Registered _____

(Part 1 - All Applications)
 Please read 'NOTES FOR APPLICANTS' first

<p>1. APPLICANT (in block capitals)</p> <p>Name: <u>MR D MUSTINSON</u></p> <p>Address: <u>4 ORCHARD WAY</u> <u>ADOLESTONE</u> <u>SURREY</u></p> <p>Tel No. Home: _____ Work: _____</p> <p>Post Code: <u>KT15 1NP</u></p>	<p>AGENT (if any) to whom correspondence should be sent (in block capitals)</p> <p>Name: <u>TURNER + PARTNERS</u></p> <p>Address: <u>THE OLD HOSPITAL, ARDINGLY</u> <u>ROAD, CUCKFIELD, HAYWARDS</u> <u>HEATH, WEST SUSSEX</u></p> <p>Contact Name: <u>JAMES WILLIAMS</u> Tel. No: <u>01444 476549</u></p> <p>Post Code: <u>RH17 5HF</u></p>
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2(a) ADDRESS or location of application site: 4 ORCHARD WAY, ADOLESTONE, SURREY
KT15 1NP

(b) State site area in Hectares and Acres Site (including sight lines and access roads) must be shown edged RED on the submitted site plan.

(c) What is the applicant's interest in the land? e.g. Owner, Prospective Purchaser, Lessee, etc. OWNER

(d) Does the applicant own or control any adjoining land? State YES or NO NO If YES it must be shown edged BLUE on the submitted site plan.

3. BRIEF PARTICULARS OF PROPOSED DEVELOPMENT, including the purpose(s) for which the land and/or buildings are to be used.
PROPOSED ERECTION OF TWO SEMI-DETACHED DWELLINGS, FOLLOWING THE DEMOLITION OF THE EXISTING DWELLING AND GARAGE.

4. TYPE OF APPLICATION Do you seek:

Tick one box

A. Full planning permission	<input checked="" type="checkbox"/>	
B. Outline planning permission	<input type="checkbox"/>) If B or C, tick which of the following matters you would like the Council to consider as part of this application.
C. Approval of reserved matters following the grant of outline permission	<input type="checkbox"/>	
) Access <input type="checkbox"/> Appearance <input type="checkbox"/> Landscaping <input type="checkbox"/>
D. To renew a permission granted for a limited period only	<input type="checkbox"/>) Layout <input type="checkbox"/> Scale <input type="checkbox"/>
E. To change or remove a planning condition	<input type="checkbox"/>	

If C, give details of the outline permission in the boxes below.
 If D or E, give details of relevant permission in the boxes below.

Reference No. Date Condition No.

5. IS THIS APPLICATION FOR A TEMPORARY PERIOD ONLY? NO If YES, state what period _____

6. IF THE APPLICATION IS FOR NEW RESIDENTIAL DEVELOPMENT, state the following :-

(a) Total number of dwellings <input type="text" value="2"/>	(b) Type (e.g. 3 x 2 bedroom flats) <u>2 x 3 Bed</u>	(c) Total number of habitable rooms <input type="text" value="12"/>
(d) Density in dwellings per hectare/acre <input type="text" value="14.3"/>	(e) Number of Storeys <input type="text" value="2"/>	(f) Gross floor area of residential buildings proposed (sq. metres/sq. feet) <input type="text" value="372"/> m ²
(g) Number of Garages <input type="text" value="2"/>	(h) Number of parking spaces <input type="text" value="2"/>	<input type="text" value=""/> ft ²

7. (a) WHAT IS THE PRESENT USE OF THE LAND/BUILDINGS? If vacant, what was the last use and when did this cease?
RESIDENTIAL

(b) What buildings are being demolished? BUNGALOW + DETACHED GARAGE
 If any state gross floor area (sq. metres/sq. feet) 89 m² ft²

8. DOES THE PROPOSED DEVELOPMENT INVOLVE: (a) Construction of a new access to a highway? (b) Alteration of an existing access to a highway? (c) The felling of any trees?

State YES or NO

If YES indicate positions on plan

	Vehicular	Pedestrian	Vehicular	Pedestrian	
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

(d) How will surface water be disposed of? TO SOAKAWAYS

(e) How will foul sewage be dealt with? TO EXISTING FOUL SYSTEM

9. DISABLED ACCESS. Does the proposed development provide access and facilities for disabled people in accordance with the Disability Discrimination Act 1995?

State YES or NO YES State YES or NO

(See Notes for Applicant to check whether your proposal requires disabled access provision)

10. (a) LIST DETAILS OF EXTERNAL BUILDING MATERIALS TO BE USED IF YOU ARE SUBMITTING THEM AT THIS STAGE
RED BRICK WITH WHITE PVCU WINDOWS AND DOORS, UNDER CLAY TILES.

(b) List any samples that are being submitted N/A

11. LIST ALL DRAWINGS, PLANS, CERTIFICATES, DOCUMENTS, ETC. forming part of the application.
DRAWINGS NO: 06082/01/02/03 - REV A
COMPLETED PLANNING APPLICATION FORM, SUPPORTING STATEMENT - DESIGN + ACCESS STATEMENT, PLANNING OBLIGATIONS SECTION 106
CERTIFICATE A AND AGRICULTURAL HOLDINGS CERTIFICATE

12. (a) ARE ANY 'LISTED' BUILDINGS to be demolished or altered? (b) Are any non-listed buildings in a Conservation Area to be demolished?

State YES or NO NO State YES or NO NO

13. I HEREBY APPLY for consideration of the development described on the application form(s) and shown on the accompanying plans.
~~I enclose Part 2 of the form (for applications involving Industrial, Office, Retail, Storage or Warehousing development)~~
 I enclose a signed Certificate under Article 7.
 I enclose four copies of the appropriate form(s) and four copies of all plans. (Part 1, and Part 2 if appropriate)

* I enclose the fee of £ N/A - resubmission following refusal RU.07/0055

Signed [Signature] On behalf of MR. D. MUSTINSON
 (Insert Applicant's name if signed by an Agent)

Date 29/08/07

* Delete where appropriate

PLEASE ENSURE THIS FORM IS SIGNED AND DATED BEFORE SUBMITTING.
 RETURN TO :- Technical Services Department,
 Runnymede Borough Council,
 Civic Offices, Station Road,
 Addlestone, Surrey, KT15 2AH.
 pladep:admin/julie/planning forms/planappfrm rev

**TOWN & COUNTRY PLANNING (GENERAL DEVELOPMENT PROCEDURE) ORDER 1995
CERTIFICATE UNDER ARTICLE 7**

CERTIFICATE A

I CERTIFY THAT:

On the day 21 days before the date of the accompanying application, nobody except the applicant was the owner¹ of any part of the land to which the application relates.

SIGNED *J. Walker* DATE 24/08/07

ON BEHALF OF MR. D. HUSHINSON
(Insert name of applicant if signed by agent)

CERTIFICATE B

I CERTIFY THAT:

I have/The applicant has given the requisite notice to everyone else who, on the day 21 days before the date of the accompanying application, was the owner of any part of the land to which the application relates, as listed below:

<u>Owner's Name:</u>	<u>Address at which Notice was served:</u>	<u>Date on which Notice was served:</u>

SIGNED DATE

ON BEHALF OF
(Insert name of applicant if signed by agent)

→ PLEASE NOTE THAT THE AGRICULTURAL HOLDINGS CERTIFICATE MUST BE COMPLETED IN ALL CASES

AGRICULTURAL HOLDINGS CERTIFICATE

Whichever is appropriate of the following alternatives **must form part of Certificates A, B, C or D**. If the applicant is the sole agricultural tenant they must delete the first alternative and insert 'not applicable' as the information required by the second alternative.

Either: None of the land to which the application relates is, or is part of, an agricultural holding.

Or: I have/The applicant has given the requisite notice to every person other than my/him/her self 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:

<u>Tenant's Name:</u>	<u>Address at which Notice was served:</u>	<u>Date on which Notice was served:</u>

SIGNED *J. Walker* DATE 24/8/07

ON BEHALF OF MR D HUSHINSON
(Insert name of applicant if signed by agent)

¹ 'Owner' means a person having a freehold interest or a leasehold interest the unexpired term of which is not less than seven years.



Babcock Networks Ltd
The Old Hospital
Ardingly Road
Cuckfield
Haywards Heath RH17 5HF
United Kingdom

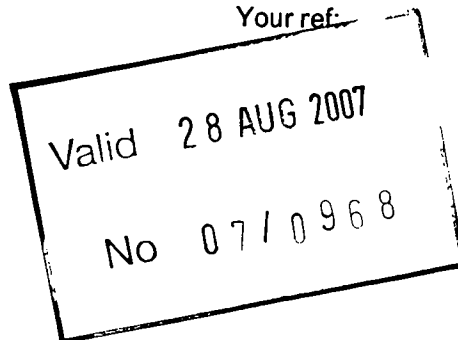
Tel +44 (0)1444 476549
Fax +44 (0)1444 476541
www.turnerandpartners.co.uk

Chief Planning Officer
Planning Department
Runnymede Borough Council
Civic Offices
Station Road
Addlestone
Surrey
KT15 2AH

FAO: Louise Waters

Dear Sirs,

Our ref: JW/4ORCHARDWAY
Your ref:



24th August, 2007
RECORDED DELIVERY

Re: Full Planning Application for erection of two semi-detached dwellings following the demolition of the existing dwelling and garage at 4 Orchard Way, Addlestone, Surrey, KT15 1NP

Further to my letter of 19th June, 2007 I enclose a full planning application for the above development comprising following documents:

- Completed Planning Application Form and certificates (four copies)
- Drawings – Ref: 06082/01/02/03 – Rev A (four copies)
- Supporting Statement – Design and Access Statement (4 copies)
- Planning obligation Section 106
- No Fee (Resubmission following refusal RU. 07/0055)

I trust you have sufficient information to consider the application. However, should you require any further information please do not hesitate to contact me. If you consider that a meeting, either on site or at your offices, would assist your understanding and/or consideration of the proposal I would be very pleased to attend.

Yours faithfully,

James Williams BA (Hons)
Planner

Mobile number: 07880 553538
Tel: +44(0) 1444 476549
james.williams@turnerandpartners.co.uk

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