

120155

County of Herefordshire District Council
Planning Services
PO Box 230
Blueschool House
Blueschool Street
Horeford
HR1 2ZB

First name: CALL UM

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

²ublication of applications on planning authority websites

First name: MICHAEL

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.

'lease complete using block capitals and black ink.

1. Applicant Name and Address

Title:

t is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

2. Agent Name and Address

Last name:	PUGH	Last name: O'SULLIVAN
Company (optional):		Company (optional): EVOENERGY LTD
Unit:	House House suffix:	Unit: 27 House number: House suffix:
House name:	THE HANBURIES	House name:
Address 1:		Address 1: 27 ELDON BUSINESS PARK
Address 2:		Address 2: ELDON ROAD
Address 3:		Address 3:
Town:	BISHOP'S FROME	Town: NOTTINGHAM
County:	WORCESTER	County: NOTTINGHAMSHIRE
Country:	ENGLAND	Country: ENGLAND
Postcode:	WRG SAT	Postcode: NG96DZ.
3. Descri	ption of the Proposal	
	cribe the proposed development, including any change	
	LLATION OF 18 GROUND MOUNT	ICRO GENERATION OF ELECTRICITY
	A KACO POWADOR 4202	INVERTER -
USING	A RACO PONADOR 4101	HEREFORDSHIRE COUNCIL PLANNING SERVICES DEVELOPMENT CONTROL
		- 8 FEB 2012
		То
las the huil	lding, work or change of use already started?	Yes No
ius the buil		
fYes, pleas	e state the date when building, e were started (DD/MM/YYYY):	(date must be pre-application submission)
f Yes, pleaso work or use as the build f Yes, pleaso		(date must be pre-application submission) Yes No (date must be pre-application submission)

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House House suffix:	authority about this application?
House name: THE HANBURIES	If Yes, please complete the following information about the advice
Address 1:	you were given. (This will help the authority to deal with this application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: BISHOP'S FROME	LINDA WHITE.
County: WORCESTER	Reference:
Postcode (optional): WR6 5AT	N120155/FH .
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: 366980 Northing: 247171	Details of pre-application advice received?
Description:	UNABLE TO PROCEED ON HOUSEHOLD
	RESIDENTIAL CURTLIDGE, PLEASE SUBMIT
	FULL PLANNING APPLICATION ALONG WITH
	CHEQUE .
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
s a new or altered vehicle access proposed to or from the public highway? Yes No	Do the plans incorporate areas to store and aid the collection of waste? Yes No
s a new or altered pedestrian access proposed to or from	If Yes, please provide details:
the public highway? Yes No	
Are there any new public roads to be provided within the site?	
Are there any new public	
ights of way to be provided within or adjacent to the site? Yes No	
Do the proposals require any diversions	Have arrangements been made
extInguishments and/or reation of rights of way?	for the separate storage and collection of recyclable waste?
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
A set o sie o Francisco de la constanta de la	
J. Authority Employee / Member Vith respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member	
(c) related to a member of staff (d) related to an elected member	
f Yes, please provide details of the name, relationship and role	ÇI
- 1-15, produce provide details of the harrie, relationship and tole	

	Existing (where applicable)		Proposed		Not applicable	Don't Know
Walls					X	
Roof					X	
Windows					X	
Doors					Ø	
Boundary treatments (e.g. fences, walls)					×	
Vehicle access and hard-standing					X	
Lighting					X	
Others (please specify)	GRASSLAND		ANNODISED ALUMINIUM DRIVEN WTO THE GO THE BLACK SOLAR P MOUNTED.	bonnd on which		
f Yes, please state refe	Iltional information on submitted plan rences for the plan(s)/drawing(s)/designs SUPPLIED WITH	gn and acces	s statement:	nt? Yes		No
0. Vehicle Parkin						
Type of Vehic	rmation on the existing and proposed		n-site parking spaces: al proposed (including spaces retained)	Difference in spaces		
Cars	Existing		spaces retained/	in spaces		
Light goods veh public carrier vel	icles/				6	
Motorcycles						
Disability space	res					
Cycle space	s				44.3	
Other (e.g. Bu					e Vi	
Other (e.g. Bu	is)					911

11. Foul Sewage	12. Assessment of Flood Risk .
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess plt	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes X No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere?
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:
notes for further information on when there is a reasonable ikelihood that any important biodiversity or geological	Arassia C.
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
laving referred to the guidance notes, is there a reasonable	Is the site currently vacant? Yes No
ikelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
i) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development No	When did this use end (if known)?
Designated sites, important habitats or other biodiversity	(date where known may be approximate)
eatures: Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on land adjacent to or near the proposed development	assessment with your application.
⊠′ No	Land which is known to be contaminated? Yes X No
) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
No No	
5. Trees and Hedges	16. Trade Effluent
re there trees or hedges on the roposed development site?	Does the proposal involve the need to dispose of trade effluents or waste?
.nd/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
roposed development site that could influence the evelopment or might be important as part f the local landscape character? Yes	of trade effluents or waste
Yes to either or both of the above, you may need to provide a full ree Survey, at the discretion of your local planning authority. If a	
ree Survey is required, this and the accompanying plan should be ub mitted alongside your application. Your local planning	
uthority should make clear on its website what the survey should on tain, in accordance with the current 'BS5837: Trees in relation to on struction - Recommendations'.	

I	ropos	ed	Hous	ing					Existi	ng l	Hous	ing			
Market Housing	Not known	1	Numb	per of		ooms Unknown	Total	Market Housing	Not known	1	Numl 2	per of		ooms	Tota
Houses		•	-	3	71	OTIKITOWIT		Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats						N. Carlot	
Sheltered housing					179			Sheltered housing							
Bedsit/studios					7-7-			Bedsit/studios			P. ST				
Unknown type								Unknown type							
	To	otals	(a + b	+ + + + + + + + + + + + + + + + + + + +	d+e	+f+g)=			To	otals	(a+b	+ c +	d+e	+f+g)=	
															_
Social Rented	Not known	1	Numb	oer of		ooms Unknown	Total	Social Rented	Not known	1	Numl 2	oer of	Bedr 4+	Ooms Unknown	Tota
Houses		•	-		71	OTIKITOWIT		Houses							
Flats and maisonettes								Flats and maisonettes							-
Live-work units								Live-work units							
Cluster flats								Cluster flats				7.5			
Sheltered housing		H.						Sheltered housing							
Bedsit/studios								Bedsit/studios		4.4					
Unknown type	П							Unknown type							
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		otals	(a+b)) + c +	d+e	+f+g)=		- Children Spe	To	otals	(a+b	+ + + + +	d+e	+f+g)=	
			10.10	-							-				
Intermediate	Not known	1	Numl 2	per of		ooms Unknown	Total	Intermediate	Not known	1	Num 2	oer of	Bedr 4+	ooms Unknown	Tota
Houses								Houses							-
Flats and maisonettes					PAC.	e time		Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing		4.45		100				Sheltered housing					19.7		
Bedsit/studios								Bedsit/studios							
Unknown type		21		16				Unknown type							
	T	otals	(a+b) + c +	d+e	+f+g)=			Т	otals	(a+ b) + c +	d+e	(+f+g)=	
			Nicons		D - L		Total				Num	horo	FRadi	rooms	Tota
Key worker	Not known	1	2	3	4+	ooms Unknown		Key worker	Not known	1	2	3	4+	Unknowr	-
Houses						7		Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios		1 2					
Un known type								Unknown type							
		otals	s (a + l	b+c+	d+6	(+f+g)=			Т	otal	s (a + l)+c+	+ d + e	e+f+g)=	
											t.	15		G L W - T	
Total proposed i	esiden	tial ι	inits	(A+	B+C	(+D)=	9	Total existing	reside	ntial	units	(E	+++	G+H)=	

				in or change of u				
Use class/type of use		Existing gross internal floorspace (square metres)		Gross internal floorspace to be lost by change of use or demolition (square metres)		Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	Sho	ops						
	Net trada	able area:						
A2	Financ	ial and al services						
АЗ	Restaurant	s and cafes						
A4	Drinking est	ablishments						
A5	Hot food	takeaways						
B1 (a)	Office (oth	er than A2)						
B1 (b)		ch and pment						
B1 (c)		dustrial						
B2	General	ndustrial						2022
B8	Storage or	distribution					,	
C1	Hotels an	d halls of			1		A	
C2		ence institutions	П					
D1	Non-res	idential						
D2		utions and leisure					AND	To the state of th
OTHER	, issembly	and reisare						
Please								
Specify		1						
		tal						
	In addition, for hotels, residential institutions an							
class	Type of use	applicable		of use or dem	olition	ch	s proposed (including anges of use)	Net additional rooms
C1	Hotels Residential							
	Institutions	Ш						
OTHER								
Please								
9. Em	ployment							
lease co	omplete the	following inf	orma	tion regarding er	mployees:			
				Full-time	Part-	time		al full-time uivalent
Ex	isting employ	/ees						arvarerre
Pro	posed emplo	yees						
0 Ho	urs of Ope	ning						
			ing f	or each non-resid	lantial use nee-	orad.		
ricas	Use			y to Friday	Saturda		Sunday and	Not known
	036	ivi	Oriua	ytoriday	Saturda	у	Bank Holidays	Notkilowit
					2			

\$Date:: 2010-09-10 #5 \$Revision: 2999 \$

22. Industrial or Commercial Proce	sses	and M	achine	ry		
Please describe the activities and processes to be carried out on the site and the end produplant, ventilation or air conditioning. Please it type of machinery which may be installed or	cts in	would cluding de the	4/4			
Is the proposal a waste management develo	pmer	nt?	Yes	⋈ No		
If the answer is Yes, please complete the foll	owing	g table:				
	Not applicable	The t includi allow tonr	ng engir ance for	city of the void in seering surcharge a cover or restoration d waste or litres if l	and making : on material (d	throughput in tonnes
Inert landfill						
Non-hazardous landfill						
Hazardous landfill						
Energy from waste incineration						
Other incineration						
Landfill gas generation plant						
Pyrolysis/gasification						
Metal recycling site						
Transfer stations						
Material recovery/recycling facilities (MRFs)						
Household civic amenity sites						
Open windrow composting						
In-vessel composting						
Anaerobic digestion		1.58				
Any combined mechanical, biological and/ or thermal treatment (MBT)						
Sewage treatment works						
Other treatment						
Recycling facilities construction, demolition and excavation waste						
Storage of waste						
Other waste management						
Other developments						•
Please provide the maximum annual operat	ional	through	put of th	e following waste	streams:	
Municipal						
Construction, demolition and e		ation				
Commercial and indust	rial					
Hazardous		wide C	they lafe	mation before	r application	n can be determined. Vour waste
If this is a landfill application you will need planning authority should make clear what	infor	mation i	t require	on its website.	ur application	n can be determined. Tour waste
23. Hazardous Substances	1	7				
Do es the proposal involve the use or storag the following materials in the quantities sta			Yes	No	Not app	plicable
If Yes, please provide the amount of each su	ıbstaı	nce that	is involve	ed:		
Acrylonitrile (tonnes)		Ethylene	oxide (to	onnes)		Phosgene (tonnes)
Ammonia (tonnes)	Hyd	lrogen c	yanide (t	onnes)		Sulphur dioxide (tonnes)
Bromine (tonnes)		Liquid o	xygen (t	onnes)]	Flour (tonnes)
Chlorine (tonnes)	iquid	petroleu	ım gas (t	onnes)	Re	efined white sugar (tonnes)
Other:				Other:		
Amount (tonnes):				Amount (tor	nnes):	

One Certificate A, B, C, or D, must b	completed, together with the Agricult		this application form
I certify/The applicant certifies that on ti	CERTIFICATE OF OWNERSHIP - CER velopment Management Procedure) (E le day 21 days before the date of this appl oterest or leasehold interest with at least 7 years	ngland) Order 2010 Certificat	the applicant was the
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
			08/02/2012.
I certify/ The applicant certifies that I ha	CERTIFICATE OF OWNERSHIP - CER velopment Management Procedure) (Eve/the applicant has given the requisite rem, was the owner (owner is a person with a ling to which this application relates.	ngland) Order 2010 Certificat notice to everyone else (as listed	i below) who, on the day i
Name of Owner	Address		Date Notice Served
certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been	Or signed - Agent: CERTIFICATE OF OWNERSHIP - CER velopment Management Procedure) (E issued for this application taken to find out the names and addresses at least 7 years left to run) of the land or bu	ngland) Order 2010 Certificat s of the other owners (owner is a	a person with a freehold
•		•	
Name of Owner	Address		Date Notice Served
Notice of the application has been pub circulating in the area where the land i	ished in the following newspaper structed):	On the following date (whithan 21 days before the date	ch must not be earlier te of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
		STATE:: 20	110-09-10 #\$ \$Revision: 2999 \$

24. Ownership Certificates

24, Ownership Certificates (con	ntinued)					
Town and Country Planning (Delicertify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been date of this application, was the of any part of the land to which The steps taken were:	CERTIFICATE evelopment Mana for this application taken to find out the e owner (owner is a	he names and	addresses of ever	l) Order 2010 Certificate ryone else who, on the da r leasehold interest with at	ny 21 days before the least 7 years left to ru	: in)
Notice of the application has been publ (circulating in the area where the land in	lished in the follow s situated):	ing newspape	er On tha	the following date (which in 21 days before the date	h must not be earlier e of the application):	
Signed - Applicant:		Or signed - A	gent:		Date (DD/MM/YYY	(Y):
(A) None of the land to which the applie	AGRICULT velopment Manag ultural Land Declara	gement Proce ation - You Mu	ist Complete Eithe	er A or B		00
Signed - Applicant:		Or signed - A	gent:		Date (DD/MM/YY)	
					08/02/2017	2
(B) I have/ The applicant has given the r before the date of this application, was as listed below:	requisite notice to a tenant of an agri	every person cultural holdi	other than myself, ng on all or part of	the applicant who, on the fthe land to which this ap	ne day 21 days oplication relates,	
Name of Tenant			Address		Date Notice Serve	d
	Land of the				4	-
						-
Signed - Applicant:		Or signed - A	gent:		Date (DD/MM/YY	YY):
	¥					_
26. Planning Application Requires read the following checklist to make the following checklist to make the control of the cont	nake sure you have application being of submitted.	sent all the in	formation in supp	ort of your proposal. Fail ensidered valid until all in	ure to submit all formation required	
he original and 3 copies of a complete polication form:	d and dated	N	The correct fee:			1
he original and 3 copies of the plan wh	nich identifies		The original and	3 copies of a design and nelp text and guidance no	access statement, otes for details):	M
he land to which the application relate dentified scale and showing the directi	es drawn to an		The original and	3 copies of the complete ficate (A, B, C, or D - as ap	ed, dated	P
he original and 3 copies of other plans nformation necessary to describe the s	and drawings or ubject of the applic	cation:	The original and	3 copies of the complete cate (Agricultural Holding	ed, dated	P

Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY)	<u>):</u>
			08/02/2012	(date cannot b pre-application
28. Applicant Contact Details		29. Agent Contact D	etails	
Telephone numbers		Telephone numbers		
Country code: Mobile number (optional)	Extension number:	Country code: Mobile r	I number: 957 5484 number (optional): nber (optional):	Extension number:
30. Site Visit				
Can the site be seen from a public road, public to continue and the public road.	•	r other public land? Ye	<u> </u>	1
If the planning authority needs to make an out a site visit, whom should they contact?	appointment to carry (Please select only one)	Agent Ag	oplicant Other (if	f different from t oplicant's details
f Other has been selected, please provide:	·		292	F F 1 1 1 1 1 1 1 1 1 1
Contact name:		Telephone number:		