



City and County of
Swansea
Dinas a Sir
Abertawe

City & County of Swansea Council,
Environment Department, Planning Services,
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20 11 / 12 02

Cyngor Dinas a Sir Abertawe
Adran yr Amgylchedd, Gwasanaethau Cynllunio,
Canolfan Ddinesig, Heol Ystumllwynarth,
Abertawe, SA1 3SN
Ffon: 01792 635701 Fax: 01792 635719
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Application for Planning Permission. Town and Country Planning Act 1990

Application of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink.

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

1. Applicant Name and Address

Name: First name:
 Surname:
 Company (optional):
 Unit: House number: House suffix:
 House name:
 Address 1:
 Address 2:
 Address 3:
 Town:
 County:
 Country:
 Postcode:

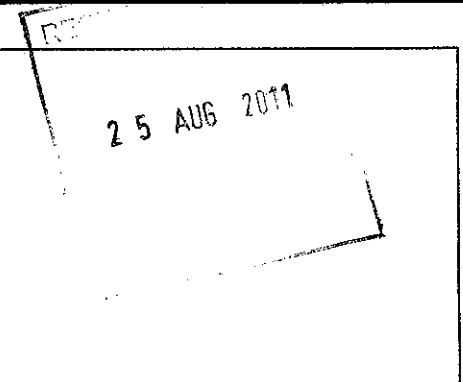
2. Agent Name and Address

Title: First name:
 Last name:
 Company (optional):
 Unit: House number: House suffix:
 House name:
 Address 1:
 Address 2:
 Address 3:
 Town: REGENERATION AND HOUSING DEPT.
 County:
 Country:
 Postcode:
 Date: 07 SEP 2011
 REG No: FEE:

Description of the Proposal

Please describe the proposed development, including any change of use:

4 BED ROOM DWELLING & GARAGE



Has the building, work or change of use already started?

Yes

No

Yes, please state the date when building, work or use were started (DD/MM/YYYY):

(date must be pre-application submission)

Has the building, work or change of use been completed?

Yes

No

Site Address Details

Please provide the full postal address of the application site.

Site: House number: House suffix:

Use name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference. Must be completed if postcode is not known:

OS Griding: Northing:

Description:

SWANSEA ROAD,
WAUNARLWYD

5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY): (must be pre-application submission)

Details of pre-application advice received?

PREVIOUS APPLICATIONS AND DISCUSSIONS L. DAULEY AND MARTIN BRAIN

Pedestrian and Vehicle Access, Roads and Rights of Way

Are new or altered vehicle access proposed to or from the public highway? Yes No

Are new or altered pedestrian access proposed to or from public highway? Yes No

Are there any new public roads to be provided within the site? Yes No

Are there any new public rights of way to be provided within or adjacent to the site? Yes No

Do the proposals require any diversions of rights of way? Yes No

If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan/drawings(s)

7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste? Yes No

If Yes, please provide details:

REGENERATION AND HOUSING DEPT.

07 SEP 2011

Have arrangements been made for the separate storage and collection of recyclable waste? Yes No

If Yes, please provide details:

SEE DESIGN & ACCESS STATEMENTS AND BLOCK PLAN.

25 AUG 2011

Neighbour and Community Consultation

Have you consulted your neighbours or a local community about the proposal? Yes No

If Yes, please provide details:

THROUGH PREVIOUS APPLICATIONS

9. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council? Yes No

If Yes, please provide details:

If applicable, please state what materials are to be used externally. Include type, colour and name for each material.

Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
	2011/1202			
Walls	TIMBER CLADDING WHITE RENDER	<input type="checkbox"/>	<input type="checkbox"/>	
Roof	SYNTHETIC SLATE	<input type="checkbox"/>	<input type="checkbox"/>	
Windows	TIMBER ALU.	<input type="checkbox"/>	<input type="checkbox"/>	
Doors	n n	<input type="checkbox"/>	<input type="checkbox"/>	
Boundary treatments (e.g. fences, walls)	/	<input type="checkbox"/>	<input type="checkbox"/>	
Vehicle access and hard-standing	PERMEABLE PAVING	<input type="checkbox"/>	<input type="checkbox"/>	
Lighting	/	<input type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)	/	<input type="checkbox"/>	<input type="checkbox"/>	

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

Yes No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

REGENERATION AND HOUSING DEPT.

DESIGN & ACCESS STATEMENT,
DRAWING 142.21

07 SEP 2011

REG NO. FEE

11. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	2	3-4	1-2
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces			
Cycle spaces			
Other (e.g. Bus)			

4. Foul Sewage

Please state how foul sewage is to be disposed of:

- Mains sewer
- Cess pit
- Septic tank
- Other
- Package treatment plant

Are you proposing to connect to the existing drainage system? Yes No

If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):

SEE SEWAGE TREATMENT ON DRAWINGS + SHEET ON DRAINAGE WITH D&A STATEMENT

5. Biodiversity and Geological Conservation

Is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or land adjacent to or near the application site?

Protected and priority species:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

Designated sites, important habitats or other biodiversity features:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

Features of geological conservation importance:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

6. Trees and Hedges

Are there trees or hedges on the proposed development site? Yes No

And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes No

If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. Your Local Planning Authority should make clear

13. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the 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.)

2011/1207

- Yes
- No

If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No

Will the proposal increase the flood risk elsewhere? Yes No

How will surface water be disposed of?

- Sustainable drainage system
- Existing watercourse
- Soakaway
- Pond/lake
- Main sewer

15. Existing Use

Please describe the current use of the site:

GARDEN

Is the site currently vacant? Yes No

If Yes, please describe the last use of the site:

When did this use end (if known)? DD/MM/YYYY (date where known may be approximate)

GENERATION AND HOUSING DEPT.

Does the proposal involve any of the following:

- Land which is known to be contaminated? Yes No
- Land where contamination is suspected for all or part of the site? Yes No
- A proposed use that would be particularly vulnerable to the presence of contamination? Yes No

07 SEP 2011

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If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.

17. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste? Yes No

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

Empty box for describing trade effluent disposal.

Does your proposal include the gain, loss or change of use of residential units? Yes No
 If Yes, please complete details of the changes in the tables below:

Proposed Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>				<input checked="" type="checkbox"/>		b
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							4

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							8

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							0

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							0

Total proposed residential units (A+B+C+D)= **1**

Existing Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							1202

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							0

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							0

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
Totals (a+b+c+d+e+f+g)=							0

Total existing residential units (E+F+G+H)= **1**

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07 SEP 2011

If you have answered Yes to the question above please add details in the following table:

Use class/type of use	Not applicable	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	<input type="checkbox"/>				
Shops	<input type="checkbox"/>				
Net tradable area:	<input type="checkbox"/>				
A2	<input type="checkbox"/>				
Financial and professional services	<input type="checkbox"/>				
A3	<input type="checkbox"/>				
Restaurants and cafes	<input type="checkbox"/>				
B1 (c)	<input type="checkbox"/>				
Light industrial	<input type="checkbox"/>				
B2	<input type="checkbox"/>				
General industrial	<input type="checkbox"/>				
B8	<input type="checkbox"/>				
Storage or distribution	<input type="checkbox"/>				
C1	<input type="checkbox"/>				
Hotels and halls of residence	<input type="checkbox"/>				
C2	<input type="checkbox"/>				
Residential institutions	<input type="checkbox"/>				
D1	<input type="checkbox"/>				
Non-residential institutions	<input type="checkbox"/>				
D2	<input type="checkbox"/>				
Assembly and leisure	<input type="checkbox"/>				
OTHER	<input type="checkbox"/>				
Please specify	<input type="checkbox"/>				
	<input type="checkbox"/>				
Total					

2011/1202

In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

Use class	Type of use	Not applicable	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
C1	Hotels	<input type="checkbox"/>			
C2	Residential Institutions	<input type="checkbox"/>			
Other	Hostels	<input type="checkbox"/>			

10. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent
Existing employees			
Proposed employees			

SEP 2011
 REG NO. FEE
 £

11. Hours of Opening

Please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday	Saturday	Sunday and Bank Holidays	Not known

25 AUG 2011

12. Site Area

1116m²

Please describe the activities and processes which would be carried out on the site and the end products including noise, ventilation or air conditioning. Please include the details of machinery which may be installed on site:

Does the proposal involve a waste management development? Yes No

2011/1202

If the answer is Yes, please complete the following table:

	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	Maximum annual operational throughput in tonnes (or litres if liquid waste)
Inert landfill	<input type="checkbox"/>		
Non-hazardous landfill	<input type="checkbox"/>		
Hazardous landfill	<input type="checkbox"/>		
Energy from waste incineration	<input type="checkbox"/>		
Other incineration	<input type="checkbox"/>		
Landfill gas generation plant	<input type="checkbox"/>		
Pyrolysis/gasification	<input type="checkbox"/>		
Metal recycling site	<input type="checkbox"/>		
Transfer stations	<input type="checkbox"/>		
Material recovery/recycling facilities (MRFs)	<input type="checkbox"/>		
Household civic amenity sites	<input type="checkbox"/>		
Open windrow composting	<input type="checkbox"/>		
In-vessel composting	<input type="checkbox"/>		
Anaerobic digestion	<input type="checkbox"/>		
Any combined mechanical, biological and/or thermal treatment (MBT)	<input type="checkbox"/>		
Sewage treatment works	<input checked="" type="checkbox"/>		
Other treatment	<input type="checkbox"/>		
Recycling facilities construction, demolition and excavation waste	<input type="checkbox"/>		
Storage of waste	<input type="checkbox"/>		
Other waste management	<input type="checkbox"/>		
Other developments	<input type="checkbox"/>		

Please provide the maximum annual operational throughput of the following waste streams:

Municipal		
Construction, demolition and excavation		07 SEP 2011
Commercial and industrial		REG No. FEE
Hazardous		

If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.

4. Hazardous Substances

Does the proposal involve the use or storage of any of the following materials in the quantities stated below? Yes No Not applicable

If Yes, please provide the amount of each substance that is involved:

Acrylonitrile (tonnes) <input type="text"/>	Ethylene oxide (tonnes) <input type="text"/>	Phosgene (tonnes) <input type="text"/>
Ammonia (tonnes) <input type="text"/>	Hydrogen cyanide (tonnes) <input type="text"/>	Sulphur dioxide (tonnes) <input type="text"/>
Bromine (tonnes) <input type="text"/>	Liquid oxygen (tonnes) <input type="text"/>	Flour (tonnes) <input type="text"/>
Chlorine (tonnes) <input type="text"/>	Liquid petroleum gas (tonnes) <input type="text"/>	Refined white sugar (tonnes) <input type="text"/>

Other: Other:

...Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form.

CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

2011/1202

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

23.08.2011

CERTIFICATE

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years to run) of any part of the land or building to which this application relates.

Name of Owner	Address	Date Notice Served

Signed Applicant:

Or signed Agent:

Date (DD/MM/YYYY):

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

The applicant certifies that:

Neither Certificate A or B can be issued for this application

All reasonable steps have been taken to find out the names and addresses of the other owners (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

the steps taken were:

REGENERATION AND HOUSING DEPT.

07 SEP 2011

REG No.

15E

25 2011

Name of Owner	Address	Date Notice Served

Notice of the application has been published in the following newspaper circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that:

Certificate A cannot be issued for this application

All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so.

Steps taken were:

2011/1202

Notice of the application has been published in the following newspaper circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

AGRICULTURAL HOLDINGS CERTIFICATE

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of, an agricultural holding.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

B) I have/ The applicant has given the requisite notice before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

Name of Tenant	Address	Date Notice Served

REGENERATION AND HOUSING DEPT.

Signed - Applicant:

Or signed - Agent:

07 Date (DD/MM/YYYY):

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6. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

Submit the original and 4 copies of a completed and dated application form:

- The correct fee: WITHIN 6 MONTHS REFUSAL 2010/0480
- The original and 4 copies of a design and access statement:

Submit the original and 4 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:

- Article 7 Certificate (Agricultural Holdings):

Submit the original and 4 copies of other plans and drawings or information necessary to describe the subject of the application:

- Ownership Certificate (A, B, C, or D - as applicable):

7. Declaration

We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

Country code: National number: Extension number:

[Empty input boxes for country code, national number, and extension number]

Country code: National number: Extension number:

[Empty input boxes for country code, national number, and extension number]

Country code: Fax number (optional):

[Empty input boxes for country code and fax number]

Country code: Fax number (optional):

40 11 / 1202

Email address (optional):

[Empty input box for email address]

Email address (optional):

[Empty input box for email address]

Is the site be seen from a public road, public footpath, bridleway or other public land?

Yes No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

Agent Applicant Other (if different from the agent/applicant's details)

If other has been selected, please provide:

Contact name: [Empty input box]

Telephone number: [Empty input box]

Email address: [Empty input box]

REGENERATION AND HOUSING DEPT.
07 SEP 2011
REG NO. 1

25 AUG 2011