

## Application for Outline Planning Permission With Some Matters Reserved. Town and Country Planning Act 1990

### Publication of applications on planning authority websites

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.

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

Title:  First name:

Last name:

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:

County:

Country:

Postcode:

### 3. Description of the Proposal

Please indicate those reserved matters for which approval is being sought (tick all that apply):

☐ None ☒ Access ☐ Appearance ☐ Landscaping ☒ Layout ☐ Scale

Please describe the proposed works:

CONSTRUCTION OF THE "FITZALAN LINK ROAD" BETWEEN THE A259 WORTHING ROAD AND THE EAST STREET/FITZALAN ROAD ROUNDABOUT, LITTLEHAMPTON

LU/63/11/

Outline Application for the construction of the "Fitzalan Link Road" between the A259 Worthing Road & the East Street/Fitzalan Road roundabout. This application affects a Public Right of Way.

Has building or works already been carried out? ☐ Yes ☒ No

Have the works been completed? ☐ Yes ☒ No

If Yes, please state the date when the works were completed (DD/MM/YYYY):

(date must be pre-application submission)

If Yes, please state the date when the works were completed (DD/MM/YYYY):

(date must be pre-application submission)

#### 4. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House 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):

Easting:  Northing:

Description:

LAND BETWEEN THE A259 WORTHING ROAD AND  
THE EAST STREET/FITZALAN ROAD  
ROUNDAABOUT, LITTLEHAMPTON

#### 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:

NEIL CROWTHER, ADC; CHRIS OWEN, WSCC

Reference:

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

Details of pre-application advice received?

SEE DESIGN AND ACCESS STATEMENT

#### 6. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway? ☒ Yes ☐ No ☐ Unknown

Is a new or altered pedestrian access proposed to or from the public highway? ☒ Yes ☐ No ☐ Unknown

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

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

Do the proposals require any diversions, extinguishments and/or creation of rights of way? ☐ Yes ☒ No ☐ Unknown

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

#### 7. Neighbour and Community Consultation

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

If Yes, please provide details:

THROUGH A COMMUNITY ENGAGEMENT PROGRAMME  
SINCE APRIL 2009

#### 8. Authority Employee / Member

With respect to the Authority, I am:

- (a) a member of staff  
(b) an elected member  
(c) related to a member of staff  
(d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☒ No

If yes please provide details of the name, relationship and role

## 10. Materials

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

|                                             | Existing<br>(where applicable) | Proposed                                          | Not<br>applicable        | Don't<br>Know                       |
|---------------------------------------------|--------------------------------|---------------------------------------------------|--------------------------|-------------------------------------|
| Walls                                       |                                |                                                   | <input type="checkbox"/> | <input type="checkbox"/>            |
| Roof                                        |                                |                                                   | <input type="checkbox"/> | <input type="checkbox"/>            |
| Windows                                     |                                |                                                   | <input type="checkbox"/> | <input type="checkbox"/>            |
| Doors                                       |                                |                                                   | <input type="checkbox"/> | <input type="checkbox"/>            |
| Boundary treatments<br>(e.g. fences, walls) |                                |                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Vehicle access and<br>hard-standing         |                                | STANDARD BITUMINOUS ROADWAY<br>AND CONCRETE KERBS | <input type="checkbox"/> | <input type="checkbox"/>            |
| Lighting                                    |                                |                                                   | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Others<br>(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:

|                      |
|----------------------|
| <br><br><br><br><br> |
|----------------------|

## 11. Vehicle Parking - NOT APPLICABLE

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

| Type of Vehicle                                  | Total<br>Existing | Total proposed (including<br>spaces retained) | Unknown total proposed<br>(including spaces retained) | Difference<br>in spaces |
|--------------------------------------------------|-------------------|-----------------------------------------------|-------------------------------------------------------|-------------------------|
| Cars                                             |                   |                                               | <input type="checkbox"/>                              |                         |
| Light goods vehicles/<br>public carrier vehicles |                   |                                               | <input type="checkbox"/>                              |                         |
| Motorcycles                                      |                   |                                               | <input type="checkbox"/>                              |                         |
| Disability spaces                                |                   |                                               | <input type="checkbox"/>                              |                         |
| Cycle spaces                                     |                   |                                               | <input type="checkbox"/>                              |                         |
| Other (e.g. Bus)                                 |                   |                                               | <input type="checkbox"/>                              |                         |
| Other (e.g. Bus)                                 |                   |                                               | <input type="checkbox"/>                              |                         |

## 12. Foul Sewage - NOT APPLICABLE

Please state how foul sewage is to be disposed of:

- |                                                  |                                   |
|--------------------------------------------------|-----------------------------------|
| <input type="checkbox"/> Mains sewer             | <input type="checkbox"/> Cess pit |
| <input type="checkbox"/> Septic tank             | <input type="checkbox"/> Other    |
| <input type="checkbox"/> Package treatment plant | <input type="checkbox"/> Unknown  |

Are you proposing to connect to the existing drainage system? ☐ Unknown ☐ 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):

## 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.)

☐ 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?

- |                                                      |                                               |
|------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Sustainable drainage system | <input type="checkbox"/> Existing watercourse |
| <input checked="" type="checkbox"/> Soakaway         | <input type="checkbox"/> Pond/lake            |
| <input type="checkbox"/> Main sewer                  |                                               |

## 14. Biodiversity and Geological Conservation

To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals.

Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to or near the application site?

a) Protected and priority species:

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

b) Designated sites, important habitats or other biodiversity features:

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

c) Features of geological conservation importance:

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

## 15. Existing Use

Please describe the current use of the site:

UNDEVELOPED OPEN LAND

Is the site currently vacant? ☐ Yes ☐ No

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

RESERVED ROAD CORRIDOR

When did this use end (if known)?  
(DD/MM/YYYY)

(date where known may be approximate)

N/A

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

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

## 16. 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 on its website what the survey should contain, in accordance with the current BS5837: Trees in relation to construction - Recommendations.

## 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

**18. Residential Units (Including Conversion)**

Does your proposal include the gain, loss or change of use of residential units?  
If Yes, please complete details of the changes in the tables below:

☐ Yes

☒ No
**Proposed Housing**

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

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

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

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

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

**Existing Housing**

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

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

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

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

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

## 19. All Types of Development: Non-residential Floorspace

**Does your proposal involve the loss, gain or change of use of non-residential floorspace?**

☐ Yes☒ No☐ Unknown

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) | Unknown                  | Total gross internal floorspace proposed (including change of use)(square metres) | Unknown                  | Net additional gross internal floorspace following development (square metres) |
|-----------------------|-------------------------------------|--------------------------|----------------------------------------------------|-------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------|
| A1                    | Shops                               | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
|                       | Net tradable area:                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| A2                    | Financial and professional services | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| A3                    | Restaurants and cafes               | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| A4                    | Drinking establishments             | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| A5                    | Hot food takeaways                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| B1 (a)                | Office (other than A2)              | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| B1 (b)                | Research and development            | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| B1 (c)                | Light Industrial                    | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| B2                    | General industrial                  | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| B8                    | Storage or distribution             | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| C1                    | Hotels and halls of residence       | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| C2                    | Residential institutions            | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| D1                    | Non-residential institutions        | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| D2                    | Assembly and leisure                | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| OTHER                 |                                     | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| Please Specify        |                                     | <input type="checkbox"/> |                                                    |                                                                                     | <input type="checkbox"/> |                                                                                   | <input type="checkbox"/> |                                                                                |
| Total                 |                                     |                          |                                                    |                                                                                     |                          |                                                                                   |                          |                                                                                |

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 | Unknown                  | Total rooms proposed (including changes of use) | Unknown                  | Net additional rooms |
|----------------|--------------------------|--------------------------|----------------------------------------------------------|--------------------------|-------------------------------------------------|--------------------------|----------------------|
| C1             | Hotels                   | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |
| C2             | Residential Institutions | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |
| OTHER          |                          | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |
| Please Specify |                          | <input type="checkbox"/> |                                                          | <input type="checkbox"/> |                                                 | <input type="checkbox"/> |                      |

10. Employment NOT APPLICABLE

**Please complete the following information regarding employees:**

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

|                     |                |
|---------------------|----------------|
| 1. Hours of Opening | NOT APPLICABLE |
|---------------------|----------------|

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

| Use | Monday to Friday | Saturday | Sunday and Bank Holidays | Not known |
|-----|------------------|----------|--------------------------|-----------|
|     |                  |          |                          |           |
|     |                  |          |                          |           |
|     |                  |          |                          |           |
|     |                  |          |                          |           |

## 2. Site Area

lease state the site area in hectares (ha)

2.43

### 23. Industrial or Commercial Processes and Machinery

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

NOT APPLICABLE

Is the proposal a waste management development? ☐ Yes ☐ No ☐ Unknown

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) | Unknown                  | Maximum annual operational throughput in tonnes (or litres if liquid waste) | Unknown                  |
|--------------------------------------------------------------------|--------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|-----------------------------------------------------------------------------|--------------------------|
| Inert landfill                                                     | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Non-hazardous landfill                                             | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Hazardous landfill                                                 | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Energy from waste incineration                                     | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Other incineration                                                 | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Landfill gas generation plant                                      | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Pyrolysis/gasification                                             | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Metal recycling site                                               | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Transfer stations                                                  | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Material recovery/recycling facilities (MRFs)                      | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Household civic amenity sites                                      | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Open windrow composting                                            | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| In-vessel composting                                               | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Anaerobic digestion                                                | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Any combined mechanical, biological and/or thermal treatment (MBT) | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Sewage treatment works                                             | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Other treatment                                                    | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Recycling facilities construction, demolition and excavation waste | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Storage of waste                                                   | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Other waste management                                             | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |
| Other developments                                                 | <input type="checkbox"/> |                                                                                                                                                                                                | <input type="checkbox"/> |                                                                             | <input type="checkbox"/> |

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

|                                         |  |
|-----------------------------------------|--|
| Municipal                               |  |
| Construction, demolition and excavation |  |
| Commercial and industrial               |  |
| 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.

### 24. Hazardous Substances NOT APPLICABLE

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:

Amount (tonnes):

Amount (tonnes):

## 25. Ownership Certificates

**One 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**

I certify/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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

**CERTIFICATE OF OWNERSHIP - CERTIFICATE B**

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

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) 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 or building to which this application relates.

| Name of Owner              | Address                                                                 | Date Notice Served |
|----------------------------|-------------------------------------------------------------------------|--------------------|
| WEST SUSSEX COUNTY COUNCIL | GRAHAM GLEN, THE TANNERY, WESTGATE,<br>CHICHESTER, WEST SUSSEX PO19 3RJ | 29.07.2011         |
|                            |                                                                         |                    |
|                            |                                                                         |                    |
|                            |                                                                         |                    |
|                            |                                                                         |                    |

Signed - Applicant:

Date (DD/MM/YYYY):

[illegible]

**CERTIFICATE OF OWNERSHIP - CERTIFICATE**

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

certify/ 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:

[illegible]

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):**

igned - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

|                                   |  |                    |
|-----------------------------------|--|--------------------|
| ABUJAH DISTRICT COUNCIL LU/63/11/ |  | DATE (DD/MM/YYYY): |
|-----------------------------------|--|--------------------|

## 25. Ownership Certificates (continued)

### CERTIFICATE OF OWNERSHIP - CERTIFICATE D

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.

The steps taken were:

|  |
|--|
|  |
|--|

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):

|  |
|--|
|  |
|--|

## 26. Agricultural Holdings

### 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

Signed - Applicant:

|  |
|--|
|  |
|--|

Date (DD/MM/YYYY):

|            |
|------------|
| 28.07.2011 |
|------------|

(B) I have/ The applicant has given the requisite notice, on the day 21 days 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 |
|----------------|---------|--------------------|
|                |         |                    |
|                |         |                    |
|                |         |                    |
|                |         |                    |
|                |         |                    |

Signed - Applicant:

|  |
|--|
|  |
|--|

Or signed - Agent:

|  |
|--|
|  |
|--|

Date (DD/MM/YYYY):

|  |
|--|
|  |
|--|

## 27. 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.

The original and 3 copies of a completed and dated application form:



The correct fee:



The original and 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:



The original and 3 copies of a design and access statement:



The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:



The original and 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):



The original and 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings):



## 28. Declaration

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

Signed - Applicant:

Date (DD/MM/YYYY):

28.07.2011

(date cannot be pre-application)

## 29. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

## 30. Agent Contact Details

Telephone numbers

Extension number:

## 31. Site Visit

Can 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:

Telephone number:

Email address:

# αβχδ VALIDATION CHECKLIST

## OUTLINE APPLICATION FOR PLANNING PERMISSION WITH SOME MATTERS RESERVED

Three copies of all documents unless stated otherwise or submitted electronically. This form must be completed in accordance with the Arun District Council Validation checklist National and Local list of requirements. Failure to complete all boxes will result in your application being returned as invalid.

|                                             | YES                                 | N/A                                 |
|---------------------------------------------|-------------------------------------|-------------------------------------|
| Completed form                              | <input checked="" type="checkbox"/> |                                     |
| Completed Ownership Certificate             | <input checked="" type="checkbox"/> |                                     |
| Agricultural Holdings Certificate           | <input checked="" type="checkbox"/> |                                     |
| Design and Access Statement                 | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| The appropriate fee (if n/a, why?)          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Location plan                               | <input checked="" type="checkbox"/> |                                     |
| Block or Site plan                          | <input checked="" type="checkbox"/> |                                     |
| Elevations                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Floor plans                                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Sections and finished floor and site levels | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Roof plans                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

|                                                                                                                   |                                     |                                     |
|-------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|
| <b>Where SCALE is identified for determination as reserved matter</b>                                             | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Upper and lower limits for the height, width and length of each building                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>Where APPEARANCE is identified for determination at outline stage</b>                                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Elevations to be provided as per above                                                                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>Where APPEARANCE is identified for determination as reserved matter</b>                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Elevations to be provided on indicative basis                                                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>Where LAYOUT is identified for determination at outline stage</b>                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Site plans/floor plans to be provided to scale as per above                                                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>Where LAYOUT is identified for determination as reserved matter</b>                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Site plan required to detail approximate position of all buildings, routes and open spaces                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>Where ACCESS is identified for determination at outline stage</b>                                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Site plans to be provided to scale as per above                                                                   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>Where ACCESS is identified for determination as reserved matter</b>                                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Site plan required to detail approximate position of access point(s) and routes to the development and within it. | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>Where LANDSCAPING is identified for determination at outline stage</b>                                         | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Full landscaping plans required as per requirements below                                                         | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>Where LANDSCAPING is identified for determination as reserved</b>                                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

# αβχδ VALIDATION CHECKLIST

| matter                                                    |                                     |                                     |
|-----------------------------------------------------------|-------------------------------------|-------------------------------------|
| Provide brief comment on proposed landscaping strategy    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| <b>LOCAL REQUIREMENTS FOR ALL APPLICATIONS</b>            |                                     |                                     |
| Affordable Housing Statement                              | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Bin Storage and Collection Statement                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Biodiversity Survey and Report                            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Environmental Impact Assessment (EIA)                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Flood Risk Assessment                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Heritage statement                                        | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Land Contamination report                                 | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Landscaping plan – Landscape and visual impact assessment | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Loss of retail use statement/viability statement          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Noise assessment                                          | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Open space assessment                                     | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Parking layout/access plan                                | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Planning Statement                                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Retail Impact Assessment                                  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Transport Assessment / Travel Plan                        | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| Tree survey                                               | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| Ventilation/extraction statement                          | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

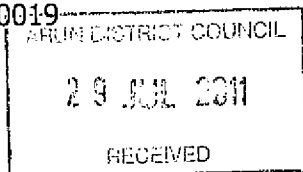
**WYG Planning & Design**

part of the WYG group



Our Ref: JG/jm/HP00019

Your Ref: LU/63/11



28 July 2011

Mr Neil Crowther  
Strategic Development Planner  
Arun District Council  
Arun Civic Centre  
Maltravers Road  
Littlehampton  
Sussex  
BN17 5LF

Dear Neil

**APPLICATION REFERENCE: LU/63/11 – PROPOSED CONSTRUCTION OF  
THE FITZALAN LINK ROAD, LITTLEHAMPTON**

As discussed, on behalf of the applicants, Greencore Uk Holdings, Hazelwood Blackditch Limited and Encore Investments Limited and others, I am writing to formally amend the current planning application from a Full application to an Outline application. Accordingly, please find enclosed 5 hard copies of the planning application form for Outline Applications with Some Matters Reserved. Please note that the only Matters for detailed consideration at this stage are "Layout" and "Means of Access."

In amending the planning application, and in response to comments received, we wish to take the opportunity to introduce 2 amendments to the proposed road layout. These amendments are described on the enclosed Mayer Brown drawing no. WYGLITTLEHAMPTON.1/24revE and comprise:

- ♦ Introduction of bus lay-bys as drop-off and pick-up points serving the Academy, and;
- ♦ The addition of a toucan crossing adjacent to Cornwall Road.

An additional planning fee is required to accompany this Outline planning application. The applicants have previously paid an application fee of £4,250 for a Full planning application. However, the outline planning application fee is calculated on the site area, which is 2.43 hectares (rounded up to 2.5 hectares). The planning fee for the outline planning application is

creative minds safe hands

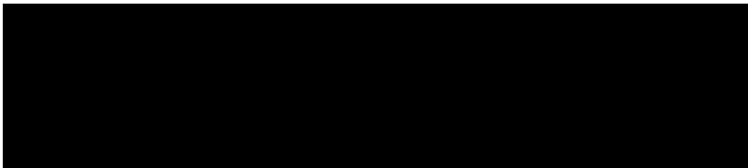


calculated at £335 per 0.1 hectares, so in this case the fee would be  $25 \times £335 = £8,375$ . An additional application fee of £4,125 is therefore payable, and this is enclosed.

Also enclosed is an updated Noise Assessment report which has been prepared in response to your Environmental Health Officer's comments, in which further noise assessments were required to assess impacts on neighbouring houses in Highdown Drive and Amberley Close, and on the Academy. This report includes those additional assessments.

Please note that the additional Ecological Surveys which have been requested by Natural England have commenced but their completion has been delayed by WSCC maintenance contractor cutting the grass. The report of those surveys will follow shortly.

Do contact me if you should have any queries regarding the above or enclosed.



**JEREMY GARDINER**

Encs.

cc: Tony Burton Esq

