South Tyneside Council



South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

## Application for Planning Permission. 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.

| 1. Applicant Name, Address and Contact Details  |                                   |                   |                    |                    |                     |  |  |
|---|-----------------------------------|-------------------|--------------------|--------------------|---------------------|--|--|
| Title: Mr   | First name: Bryan                 | Surname:          | Thompson           |                    |                     |  |  |
| Company name  | Keepmoat Homes Ltd                | ]                 |                    |                    |                     |  |  |
| Street address:   | Merchant House                    |                   | Country<br>Code    | National<br>Number | Extension<br>Number |  |  |
|   | 12 Merchant Court                 | Telephone number: |                    |                    |                     |  |  |
|   | Monkton Business Park             | Mobile number:    |                    |                    |                     |  |  |
| Town/City   | Hebburn                           |                   |                    | ] [                |                     |  |  |
| County:   | Tyne & Wear                       | Fax number:       |                    |                    |                     |  |  |
| Country:  | United Kingdom                    | Email address:    |                    |                    |                     |  |  |
| Postcode:   | NE31 2EX                          |                   |                    |                    |                     |  |  |
| Are you an agent ad   | cting on behalf of the applicant? | 🔿 No              |                    |                    |                     |  |  |
|   |                                   |                   |                    |                    |                     |  |  |
| 2. Agent Name   | , Address and Contact Details     |                   |                    |                    |                     |  |  |
| Title: Mr   | First Name: Kevin                 | Surname:          | Thompson           |                    |                     |  |  |
| Company name:   | idpartnership-northern            | ]                 |                    |                    |                     |  |  |
| Street address:   | St Jude                           |                   | Country<br>Code    | National<br>Number | Extension<br>Number |  |  |
|   | Barker Street                     | Telephone number: |                    | 0191 261 4442      |                     |  |  |
|   |                                   | Mobile number:    |                    |                    |                     |  |  |
| Town/City   | Newcastle upon Tyne               | Fax number:       |                    |                    |                     |  |  |
| County:   |                                   |                   |                    |                    |                     |  |  |
| Country:  |                                   | Email address:    |                    |                    |                     |  |  |
| Postcode:   | NE2 1AS                           | kevin.thompson@id | partnership-northe | ern.com            |                     |  |  |
| 3. Description of the Proposal  |                                   |                   |                    |                    |                     |  |  |
| Please describe the proposed development including any change of use:<br>Erection of 2no two storey residential dwellings |                                   |                   |                    |                    |                     |  |  |
| Has the building, work or change of use already started? O Yes  No  |                                   |                   |                    |                    |                     |  |  |

| 4. Site Address   | Details  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| Full postal address o   | of the site (including full postcode where available)   Description:   |  |  |  |  |  |  |
| House:  | Suffix:  |  |  |  |  |  |  |
| House name:   |  |  |  |  |  |  |  |
| Street address:   | Trinity South  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| Town/City:  | South Shields  |  |  |  |  |  |  |
| County:   | Tyne & Wear  |  |  |  |  |  |  |
| Postcode:   | NE33 5EE   |  |  |  |  |  |  |
|   | on or a grid reference<br>If postcode is not known):   |  |  |  |  |  |  |
| Easting:  | 436093   |  |  |  |  |  |  |
| Northing:   | 566083   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| 5. Pre-applicati  |  |  |  |  |  |  |  |
| Has assistance or pri   | or advice been sought from the local authority about this application?   |  |  |  |  |  |  |
| If Yes, please comple   | ete the following information about the advice you were given (this will help the authority to deal with this application more efficiently): |  |  |  |  |  |  |
| Officer name:   |  |  |  |  |  |  |  |
| Title: Mrs  | First name:     Helen     Surname:     Lynch   |  |  |  |  |  |  |
| Reference:  | Email  |  |  |  |  |  |  |
| Date (DD/MM/YYYY)   | : 17/02/2016 (Must be pre-application submission)  |  |  |  |  |  |  |
| Details of the pre-ap   | plication advice received:   |  |  |  |  |  |  |
| Advice provided for   | type of application and fee  |  |  |  |  |  |  |
| 6 Pedestrian a  | nd Vehicle Access, Roads and Rights of Way   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
|   | ehicle access proposed to or from the public highway? O Yes O No   |  |  |  |  |  |  |
| Is a new or altered p   | edestrian access proposed to or from the public highway? O Yes   No  |  |  |  |  |  |  |
| Are there any new p   | ublic roads to be provided within the site?  |  |  |  |  |  |  |
| Are there any new p   | ublic rights of way to be provided within or adjacent to the site?    Yes  No  |  |  |  |  |  |  |
| Do the proposals red  | quire any diversions/extinguishments and/or creation of rights of way? O Yes O 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(s)/drawings(s)                 |  |  |  |  |  |  |
| SL002AE   |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| 7. Waste Storag   | je and Collection  |  |  |  |  |  |  |
| Do the plans incorporate areas to store and aid the collection of waste? <ul> <li>Yes</li> <li>No</li> </ul>                          |  |  |  |  |  |  |  |
| If Yes, please provide details:   |  |  |  |  |  |  |  |
| Dedicated wheelie bin store to rear of dwellings - collection from existing collection point to south of shared surface               |  |  |  |  |  |  |  |
| Have arrangements been made for the separate storage and collection of recyclable waste?   Yes Ves No If Yes, please provide details: |  |  |  |  |  |  |  |
| Local Authority services. Recycling caddy located within dwelling kitchen.  |  |  |  |  |  |  |  |
| 8. Authority Employee/Member  |  |  |  |  |  |  |  |
| -   |  |  |  |  |  |  |  |
| With respect to the<br>(a) a mer  | Authority, I am:<br>nber of staff  |  |  |  |  |  |  |
|   | ected member<br>d to a member of staff   |  |  |  |  |  |  |
|   | d to an elected member   |  |  |  |  |  |  |
|   | Do any of these statements apply to you?   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |
| 9. Materials  |  |  |  |  |  |  |  |
| Please state what m   | aterials (including type, colour and name) are to be used externally (if applicable):  |  |  |  |  |  |  |

## 9. (Materials continued) Walls - description: Description of existing materials and finishes: As per material schedule Description of proposed materials and finishes: As per material schedule Roof - description: Description of existing materials and finishes: As per material schedule Description of proposed materials and finishes: As per material schedule Windows - description: Description of existing materials and finishes: As per material schedule Description of proposed materials and finishes: As per material schedule Doors - description: Description of existing materials and finishes: As per material schedule Description of proposed materials and finishes: As per material schedule Boundary treatments - description: Description of existing materials and finishes: N/A Description of proposed materials and finishes: N/A Vehicle access and hard standing - description: Description of existing materials and finishes: N/A Description of proposed materials and finishes: N/A Lighting - add description Description of existing materials and finishes: N/A Description of proposed materials and finishes: N/A Others - description: Type of other material: Description of existing materials and finishes: N/A Description of proposed materials and finishes: N/A 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: Materials Schedule indicating all elevational materials 10. Vehicle Parking Please provide information on the existing and proposed number of on-site parking spaces: Existing number Total proposed (including spaces Difference in Type of vehicle of spaces retained) spaces Cars 0 2 2 Light goods vehicles/public carrier vehicles 0 0 0 Motorcycles 0 0 0

Ref: 04: 6099

0

0

0

Planning Portal Reference:

Disability spaces

Cycle spaces

Other (e.g. Bus)

Short description of Other

0

2

0

0

2

0

| 11. Foul Sewage   |                             |  |                    |   |                      |  |  |  |
|---|-----------------------------|--|--------------------|---|----------------------|--|--|--|
| Please state how foul sewage  | is to be disposed of:       |  |                    |   |                      |  |  |  |
| Mains sewer   | $\boxtimes$                 | Package treatment plant  |                    | Unknown   |                      |  |  |  |
| Septic tank   |                             | Cess pit   |                    |   |                      |  |  |  |
| Other   |                             |  |                    |   | 1                    |  |  |  |
| Are you proposing to connect  | to the existing drainage    | sustom?  |                    |   |                      |  |  |  |
| Are you proposing to connect  |                             |  |                    | ) Unknown   |                      |  |  |  |
| Revised drainage drawing to f   | 0,                          | on the application drawings and  | state references f | or the plan(s)/drawing(s):  |                      |  |  |  |
|   |                             |  |                    |   |                      |  |  |  |
| 12. Assessment of Floo  | od Rísk                     |  |                    |   |                      |  |  |  |
|   | ult Environment Agency      | he Environment Agency's Flood M<br>standing advice and your local pla  |                    | 🔿 Yes 💿 No  |                      |  |  |  |
| If Yes, you will need to submit   | an appropriate flood risl   | assessment to consider the risk t                                      | to the proposed s  | ite.  |                      |  |  |  |
| Is your proposal within 20 me   | tres of a watercourse (e.c  | J. river, stream or beck)?   | $\circ$            | Yes 💿 No  |                      |  |  |  |
| Will the proposal increase the  | flood risk elsewhere?       | 🔿 Yes 💿 No   |                    |   |                      |  |  |  |
| How will surface water be disp  | oosed of?                   |  |                    |   |                      |  |  |  |
| Sustainable drainage  | system                      | Main sewer   |                    | Pond/lake   |                      |  |  |  |
| Soakaway  |                             | Existing waterco   | ourse              |   |                      |  |  |  |
|   |                             |  |                    |   |                      |  |  |  |
| 13. Biodiversity and Ge   | eological Conserva          | tion   |                    |   |                      |  |  |  |
|   |                             | the guidance notes for further inf<br>nearby and whether they are like |                    | n there is a reasonable likelihood that any imp<br>by your proposals. | portant biodiversity |  |  |  |
| 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 speci   | ies                         |  |                    |   |                      |  |  |  |
| C Yes, on the development   | t site 🔿 Yes                | , on land adjacent to or near the p                                    | proposed develop   | oment <ul> <li>No</li> </ul>  |                      |  |  |  |
| b) Designated sites, important  | t habitats or other biodiv  | ersity features  |                    |   |                      |  |  |  |
| O Yes, on the development   | t site C Yes                | , on land adjacent to or near the p                                    | proposed develop   | oment   |                      |  |  |  |
| c) Features of geological cons  | ervation importance         |  |                    |   |                      |  |  |  |
| Yes, on the development   | t site C Yes                | , on land adjacent to or near the p                                    | proposed develop   | oment <ul> <li>No</li> </ul>  |                      |  |  |  |
| 14. Existing Use  |                             |  |                    |   |                      |  |  |  |
| Please describe the current us  | e of the site:              |  |                    |   |                      |  |  |  |
| Residential construction site   |                             |  |                    |   |                      |  |  |  |
| Is the site currently vacant?   | ⊖ Yes                       | No   |                    |   |                      |  |  |  |
| Does the proposal involve any of the following?<br>If yes, you will need to submit an appropriate contamination assessment with your application.   |                             |  |                    |   |                      |  |  |  |
| Land which is known to be contaminated? Ves  Ves No   |                             |  |                    |   |                      |  |  |  |
| Land where contamination is suspected for all or part of the site?  |                             |  |                    |   |                      |  |  |  |
| A proposed use that would be  | e particularly vulnerable t | to the presence of contamination                                       | ?                  | 🔿 Yes 💿 No  |                      |  |  |  |
| 15. Trees and Hedges  |                             |  |                    |   |                      |  |  |  |
| 15. Trees and Treages   |                             |  |                    |   |                      |  |  |  |
| Are there trees or hedges on t  | he proposed developme       | nt site? C 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? Ves No   |                             |  |                    |   |                      |  |  |  |
| If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. 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 design, demolition and construction - Recommendations'. |                             |  |                    |   |                      |  |  |  |
| 16. Trade Effluent  |                             |  |                    |   |                      |  |  |  |
| Does the proposal involve the   | need to dispose of trade    | e effluents or waste?  | 0                  | Yes ( No  |                      |  |  |  |
|   |                             |  |                    |   |                      |  |  |  |

| 17. Residential Un   |   |                    |            |                      |   |                 |               |              |            |                 |
|--|---|--------------------|------------|----------------------|---|-----------------|---------------|--------------|------------|-----------------|
| Does your proposal incl<br>Market Housing - Prop                               |   | ss of residential  | units?     | (•                   | Yes No Market Housing - Ex  | isting          |               |              |            |                 |
|  | Number of bedrooms  |                    |            |                      | <b>J</b>  |                 | Nur           | nber of be   | drooms     |                 |
|  | 1   | 2 3                | 4+         | Unknown              |   | 1               | 2             | 3            | 4+         | Unknown         |
| Houses   | 2   |                    |            |                      | Houses  |                 |               |              |            |                 |
| Flats/Maisonettes  |   |                    |            |                      | Flats/Maisonettes   |                 |               |              |            |                 |
| Live-Work units  |   |                    |            |                      | Live-Work units   |                 |               |              |            |                 |
| Cluster flats  |   |                    |            |                      | Cluster flats   |                 |               |              |            |                 |
| Sheltered housing  |   |                    |            |                      | Sheltered housing   |                 |               |              |            |                 |
| Bedsit/Studios   |   |                    |            |                      | Bedsit/Studios  |                 |               |              |            |                 |
| Unknown  |   |                    |            |                      | Unknown   |                 |               |              |            |                 |
| Proposed Market Hous<br>Overall Residential Ur                                 |   | 2                  |            |                      | Existing Market Hous  | ing Total       |               | 0            |            | ]               |
| Total  | proposed resident   | ial units          |            | 2                    |   |                 |               |              |            |                 |
| Total  | l existing residenti  | al units           |            | 0                    |   |                 |               |              |            |                 |
| 18. All Types of De  | avalanmant.   | lon resider        | tial Fla   | orchass              |   |                 |               |              |            |                 |
| Does your proposal inve  | -   |                    |            | -                    | ce?   | C Yes           | 5 💿 No        | )            |            |                 |
| <b>19. Employment</b><br>If known, please comple                               | ete the following i   | oformation reg     | arding em  | nnlovees.            |   |                 |               |              |            |                 |
|  |   | Full-time          | -          | Part-time            |   | Equivalor       | nt number     | of full time |            |                 |
| Evisting omr   | lovoos  |                    | e          |                      |   | Equivalei       |               |              |            |                 |
|  | Existing employees         0         0         0           Proposed employees         0         0         0 |                    |            |                      |   |                 |               |              |            |                 |
| 20. Hours of Open  | ving  |                    |            |                      |   |                 |               |              |            |                 |
| If known, please state th  | •   | ıg (e.g. 15:30) fo | or each no | on-residential use p | roposed:  |                 |               |              |            |                 |
| Use Sta  | Monday to Frida<br>Int Time Enc   | y<br>Time          |            | Satu<br>Start Time   | SaturdaySunday and Bank HolidaysNotTimeEnd TimeStart TimeEnd TimeKnow |                 |               |              |            |                 |
| 21. Site Area  |   |                    |            |                      |   |                 |               |              |            |                 |
| What is the site area?   | 00.02   | hectare            | s          |                      |   |                 |               |              |            |                 |
| 22. Industrial or C  | ommercial Pr  | ocesses and        | l Machi    | nery                 |   |                 |               |              |            |                 |
| Please describe the acti<br>type of machinery whic<br>No industrial processes. | h may be installed  |                    | be carrie  | d out on the site ar | nd the end products inclue  | ling plant, ven | tilation or a | air conditio | ning. Plea | ase include the |
| Is the proposal for a wa   | ste management o  | levelopment?       |            | С                    | Yes 💿 No  |                 |               |              |            |                 |
| 23. Hazardous Sul  |   | oposal?            | (          | 🔿 Yes 💿 No           | )   |                 |               |              |            |                 |
| 24. Site Visit   |   |                    |            |                      |   |                 |               |              |            |                 |
|  |   |                    |            |                      |   |                 |               |              |            |                 |

| 25. Certifie  | cates (Certificate A)      |   |            |             |                  |  |  |  |
|---|----------------------------|---|------------|-------------|------------------|--|--|--|
| Certificate of Ownership - Certificate A<br>Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14<br>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<br>freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to which the application relates, and that none of the land to which the application<br>relates is, or is part of, an agricultural holding ("agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act). |                            |   |            |             |                  |  |  |  |
| Title: Mr   | First name:                | Kevin   | Surname:   | Thompson    |                  |  |  |  |
| Person role:  | Agent                      | Declaration date:   | 26/02/2016 | $\boxtimes$ | Declaration made |  |  |  |
| 26. Declar  | ation                      |   |            |             |                  |  |  |  |
| additional info   | ormation. I/we confirm the | ion/consent as described in this form a<br>at, to the best of my/our knowledge, ar<br>s of the person(s) giving them. | 1 9 81     | 0           | Date 26/02/2016  |  |  |  |