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MANCHESTER CITY COUNCIL

Planning

PO Box 463, Town Hall Extension
Manchester M60 3NY
Tel: 0161 234 4516 Fax: 0161 234 4508
Email: planning@manchester.gov.uk

Application for Planning Permission.
Town and Country Planning Act 1990

Publication 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

Title:	MR
First name:	MOHAMMED
Last name:	IMRAN
Company (optional):	
Unit:	
House number:	315
House suffix:	
House name:	
Address 1:	DICKENSON RD
Address 2:	LONGSIGHT
Address 3:	
Town:	MANCHESTER
County:	
Country:	
Postcode:	M13 0NR

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 describe the proposed development, including any change of use:

PROPOSED BASEMENT FLAT & NEW FIRE EXIT FROM 1ST FLOOR

Has the building, work or change of use already started? ☐ Yes ☑ No

If 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

If Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY): (date must be pre-application submission)

Site Address Details

se provide the full postal address of the application site.

t: | House number: 315 | House suffix:

ıse ne:

dress 1: DICKENSON RD

dress 2: LONGSIGHT

dress 3:

vn: MANCHESTER

ınty:

ıtcode ıtional):

scription of location or a grid reference.
ust be completed if postcode is not known):

ıting: Northing:

scription:

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?

Pedestrian and Vehicle Access, Roads and Rights of Way

a new or altered vehicle access proposed or from the public highway? ☐ Yes ☑ No

a new or altered pedestrian cess proposed to or from e public highway? ☐ Yes ☑ No

e there any new public roads to be ovided within the site? ☐ Yes ☑ No

e there any new public ghts of way to be provided ithin or adjacent to the site? ☐ Yes ☑ No

o the proposals require any diversions extinguishments and/or reation of rights of way? ☐ Yes ☑ No

f 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. Waste Storage and Collection

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

If Yes, please provide details:

COUNCIL BINS

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

If Yes, please provide details:

COUNCIL. BINS

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

Materials

plicable, 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
ills	N/A		☐	☐
			☐	☐
of				
indows			☐	☐
oors			☐	☐
oundary treatments .g. fences, walls)			☐	☐
'ehicle access and ıard-standing			☐	☐
.ighting			☐	☐
Others (please specify)			☐	☐

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:

10. 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	NONE	NONE	
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces			
Cycle spaces			
Other (e.g. Bus)			
Other (e.g. Bus)			

Residential Units (Including Conversion)

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

Proposed Housing

rket using	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
uses	☐						
ts and maisonettes	☐	✓					
e-work units	☐						
ister flats	☐						
eltered housing	☐						
dsit/studios	☐						
known type	☐						
Totals $(a+b+c+d+e+f+g)=$							

cial Rented	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
ouses	☐						
its and maisonettes	☐						
e-work units	☐						
uster flats	☐						
heltered housing	☐						
edsit/studios	☐						
nknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							

termediate	Not known	Number of Bedrooms 1	2	3	4+	Unknown	Total
ouses	☐						
ats and maisonettes	☐						
ve-work units	☐						
luster flats	☐						
heltered housing	☐						
edsit/studios	☐						
Jnknown type	☐						
Totals $(a+b+c+d+e+f+g)=$							

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

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

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

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

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

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

18. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace? ☐ Yes ☑ No

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	Shops	☐				
	Net tradable area:	☐				
A2	Financial and professional services	☐				
A3	Restaurants and cafes	☐				
A4	Drinking establishments	☐				
A5	Hot food takeaways	☐				
B1 (a)	Office (other than A2)	☐				
B1 (b)	Research and development	☐				
B1 (c)	Light industrial	☐				
B2	General industrial	☐				
B8	Storage or distribution	☐				
C1	Hotels and halls of residence	☐				
C2	Residential institutions	☐				
D1	Non-residential institutions	☐				
D2	Assembly and leisure	☐				
OTHER		☐				
Please Specify		☐				
	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	Total rooms proposed (including changes of use)	Net additional rooms
C1	Hotels	☐			
C2	Residential Institutions	☐			
OTHER		☐			
Please Specify		☐			

19. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent
Existing employees	N/A		
Proposed employees			

20. 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
	N/A			

21. Site Area

Please state the site area in hectares (ha) 0.176

Industrial or Commercial Processes and Machinery

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

he proposal a waste management development? ☐ Yes ☑ No

he 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	☐		
Non-hazardous landfill	☐		
Hazardous landfill	☐		
Energy from waste incineration	☐		
Other incineration	☐		
Landfill gas generation plant	☐		
Pyrolysis/gasification	☐		
Metal recycling site	☐		
Transfer stations	☐		
Material recovery/recycling facilities (MRFs)	☐		
Household civic amenity sites	☐		
Open windrow composting	☐		
In-vessel composting	☐		
Anaerobic digestion	☐		
Any combined mechanical, biological and/ or thermal treatment (MBT)	☐		
Sewage treatment works	☐		
Other treatment	☐		
Recycling facilities construction, demolition and excavation waste	☐		
Storage of waste	☐		
Other waste management	☐		
Other developments	☐		

Please provide the maximum annual 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.

23. 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) ☐ Ethylene oxide (tonnes) ☐ Phosgene (tonnes) ☐

Ammonia (tonnes) ☐ Hydrogen cyanide (tonnes) ☐ Sulphur dioxide (tonnes) ☐

Bromine (tonnes) ☐ Liquid oxygen (tonnes) ☐ Flour (tonnes) ☐

Chlorine (tonnes) ☐ Liquid petroleum gas (tonnes) ☐ Refined white sugar (tonnes) ☐

Other: ☐ Other: ☐

Amount (tonnes): ☐ Amount (tonnes): ☐

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 (Development Management Procedure) (England) Order 2010 Certificate under Article 12

rtify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the ner *(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 ch the application relates.

ned - Applicant: | Or signed - Agent: [redacted] | Date (DD/MM/YYYY): 27/1/12

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

~~ertify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day~~ 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

gned - Applicant: | Or signed - Agent: | Date (DD/MM/YYYY):

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

ertify/ 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.

he steps taken were:

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):

Ownership Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

rtify/ 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.

e steps taken were:

tice of the application has been published in the following newspaper rculating 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):

gned - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

5. Agricultural Land Declaration

AGRICULTURAL LAND DECLARATION

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

Agricultural Land Declaration - You Must Complete Either A or B

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

gned - Applicant:

Or signed - Agent: [redacted]

Date (DD/MM/YYYY): 27/1/12

) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days efore the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, s listed below:

Name of Tenant	Address	Date Notice Served

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

26. 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 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 other plans and drawings or information necessary to describe the subject of the application: ☑

The correct fee: ☑

The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details): ☐

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 12 Certificate (Agricultural Holdings): ☑

Declaration

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

ed - Applicant:

Or signed - Agent: [redacted]

Date (DD/MM/YYYY): 27/1/12 (date cannot be pre-application)

Applicant Contact Details

ephone numbers

untry code: National number: Extension number:

untry code: Mobile number (optional):

untry code: Fax number (optional):

ail address (optional):

29. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

[redacted]

Email address (optional):

. Site Visit

n the site be seen from a public road, public footpath, bridleway or other public land? ☑ Yes ☐ No

he planning authority needs to make an appointment to carry t a site visit, whom should they contact? *(Please select only one)* ☐ Agent ☑ Applicant ☐ Other (if different from the agent/applicant's details)

Other has been selected, please provide:

ontact name: Telephone number:

mail address: