

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:	Stan	Surname:	Atkinson		
Company name:							
Street address:	SWYPFT			Country Code	National Number	Extension Number	
	Estates Department			Telephone number:			
	Kendray Hospital			Mobile number:			
Town/City:	Barnsley			Fax number:			
County:	South Yorkshire			Email address:			
Country:	United Kingdom						
Postcode:	S70 3RD						
Are you an agent acting on behalf of the applicant?				<input checked="" type="radio"/> Yes	<input type="radio"/> No		

2. Agent Name, Address and Contact Details

Title:	Mr	First Name:	David	Surname:	Davies		
Company name:	P+HS Architects						
Street address:	The Old Station			Country Code	National Number	Extension Number	
	Station Road			Telephone number:	01642 712684		
				Mobile number:			
Town/City:	Stokesley			Fax number:			
County:	North Yorkshire			Email address:			
Country:	United Kingdom						
Postcode:	TS9 7AB			d.davies@pandhs.co.uk			

3. Description of the Proposal

Please describe the proposed development including any change of use:

Extensions (3no.), Internal and Minor External Modifications, Refurbishment works and upgrades to existing Health Centre. Re-Allocation of space and re-distribution of accommodation (clinical consulting and treatment rooms) to allow the trust to deliver existing and new (Re-provided from elsewhere in Barnsley) Community Services in a fit for purpose Clinical Community Healthcare Environment.

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

4. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text"/>	Suffix:	<input type="text"/>
House name:	Barnsley Community & Priority Services NHS Trust, New Street Hea		
Street address:	Upper New Street		
Town/City:	Barnsley		
County:	South Yorkshire		
Postcode:	S70 1LP		

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:	434438
Northing:	405907

5. Pre-application Advice

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

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

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

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

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

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

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:

Waste will be stored both within the building (disposal hold rooms) and within a secure (existing) compound within the North Car Park. There is no change from existing waste storage arrangements

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

If Yes, please provide details:

Within the internal and external secured storage areas as existing. There is no change from existing recyclable waste storage.

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

9. Materials

Please state what materials (including type, colour and name) are to be used externally (if applicable):

Walls - description:

Description of *existing* materials and finishes:

Brick, Dark Red, Various Types Depending on Age of Construction

Description of *proposed* materials and finishes:

Brick - Dark Red - Below OPL Course/Base Plinth
Acrylic Render - Off White
Metal Rain screen Cladding - Bronze

Roof - description:

Description of *existing* materials and finishes:

Clay/Concrete Tiles, Dark Grey, Various Types depending on age of construction

Description of *proposed* materials and finishes:

Single Ply Membrane - Dark Grey

9. (Materials continued)

Windows - description:

Description of *existing* materials and finishes:

Timber, Aluminium, UPVC, Dark Brown, Various Types depending on age of construction

Description of *proposed* materials and finishes:

Aluminium, Bronze Brown (To match Feature Wall Cladding)

Doors - description:

Description of *existing* materials and finishes:

Timber, Aluminium, UPVC, Dark Brown. Various types depending on age of construction

Description of *proposed* materials and finishes:

Aluminium (some with Large Glazed Infill panels) Bronze Brown

Boundary treatments - description:

Description of *existing* materials and finishes:

Brick walls with Cast Iron railings above, Mesh fence line with concrete posts, Timber fence line

Description of *proposed* materials and finishes:

Retention of existing. Possible replacement of Mesh Fence to Southern half of site with Brick wall and Metal Railings to match existing

Vehicle access and hard standing - description:

Description of *existing* materials and finishes:

Tarmac and Concrete

Description of *proposed* materials and finishes:

Retention of existing. Localised replacement of Tarmac Surface and White Lines to area D of Car Park

Lighting - add description

Description of *existing* materials and finishes:

Building Mounted Glass and Polycarbonate Fittings

Description of *proposed* materials and finishes:

Retention of Existing Potential upgrade to replace some fittings with more Energy Efficient Models.

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

Yes No

10. Vehicle Parking

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

Type of vehicle	Existing number of spaces	Total proposed (including spaces retained)	Difference in spaces
Cars	58	59	1
Light goods vehicles/public carrier vehicles	0	0	0
Motorcycles	0	0	0
Disability spaces	3	3	0
Cycle spaces	0	6	6
Other (e.g. Bus)	0	0	0
Short description of Other			

11. Foul Sewage

Please state how foul sewage is to be disposed of:

Mains sewer Package treatment plant Unknown
Septic tank Cess pit

Other

Are you proposing to connect to the existing drainage system?

Yes No Unknown

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

Use of existing connections from existing building

12. 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 an appropriate flood risk assessment to consider the risk to the proposed site.

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

Will the proposal increase the flood risk elsewhere? Yes No

How will surface water be disposed of?

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

13. 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

14. Existing Use

Please describe the current use of the site:

Community Health Centre

Is the site currently vacant? Yes No

Does the proposal involve any of the following?

If yes, you will need to submit an appropriate contamination assessment with your application.

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

15. 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 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 effluents or waste? Yes No

17. Residential Units

Does your proposal include the gain or loss of residential units? Yes No

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

Use class/type of use	Existing gross internal floorspace (square metres)	Gross internal floorspace to be lost by change of use or demolition (square metres)	Total gross new internal floorspace proposed (including changes of use) (square metres)	Net additional gross internal floorspace following development (square metres)

18. All Types of Development: Non-residential Floorspace (continued)

A1	Shops Net Tradable Area	0.0	0.0	0.0	0.0
A2	Financial and professional services	0.0	0.0	0.0	0.0
A3	Restaurants and cafes	0.0	0.0	0.0	0.0
A4	Drinking establishments	0.0	0.0	0.0	0.0
A5	Hot food takeaways	0.0	0.0	0.0	0.0
B1 (a)	Office (other than A2)	0.0	0.0	0.0	0.0
B1 (b)	Research and development	0.0	0.0	0.0	0.0
B1 (c)	Light industrial	0.0	0.0	0.0	0.0
B2	General industrial	0.0	0.0	0.0	0.0
B8	Storage or distribution	0.0	0.0	0.0	0.0
C1	Hotels and halls of residence	0.0	0.0	0.0	0.0
C2	Residential institutions	0.0	0.0	0.0	0.0
D1	Non-residential institutions	0.0	0.0	0.0	0.0
D2	Assembly and leisure	0.0	0.0	0.0	0.0
Other	Please Specify	2349.0	0.0	2703.0	2703.0
	Total	2349.0	0.0	2703.0	2703.0

For hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms:

Use Class	Types of use	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
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19. Employment

If known, please complete the following information regarding employees:

	Full-time	Part-time	Equivalent number of full-time
Existing employees	44	22	55
Proposed employees	56	28	70

20. Hours of Opening

If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed:

Use	Monday to Friday		Saturday		Sunday and Bank Holidays		Not Known
	Start Time	End Time	Start Time	End Time	Start Time	End Time	
A1							<input checked="" type="checkbox"/>
A2							<input checked="" type="checkbox"/>
A3							<input checked="" type="checkbox"/>
A4							<input checked="" type="checkbox"/>
A5							<input checked="" type="checkbox"/>
B1A							<input checked="" type="checkbox"/>
B1B							<input checked="" type="checkbox"/>
B1C							<input checked="" type="checkbox"/>
B2							<input checked="" type="checkbox"/>
B8							<input checked="" type="checkbox"/>
C1							<input checked="" type="checkbox"/>
C2							<input checked="" type="checkbox"/>
D1							<input checked="" type="checkbox"/>
D2							<input checked="" type="checkbox"/>
Other							<input checked="" type="checkbox"/>

21. Site Area

What is the site area?

00.44	hectares
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22. 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:

N/A

Is the proposal for a waste management development?

Yes No

23. Hazardous Substances

Is any hazardous waste involved in the proposal?

Yes No

24. 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)

The agent The applicant Other person

25. Certificates (Certificate A)

Certificate of Ownership - Certificate A

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

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 to which the application relates, and that none of the land to which the application 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: First name: Surname:

Person role: Declaration date: Declaration made

26. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Date