

Application to determine if prior approval is required for a proposed: Excavations or Deposits of Waste Material reasonably necessary for the purposes of Agriculture

Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended) - Sch 2, Part 6, Class A/B/E

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Local Planning Authority details:



**Planning Services, North Yorkshire Council,
PO Box 787, Harrogate, HG1 9RW**

Email: dmst.har@northyorks.gov.uk

Telephone: **0300 131 2 131**

Publication on Local Planning Authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website. Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

1. Applicant Name and Address

| | | | |
|---------------------|----------------------|---------------|----------------------|
| Title: | <input type="text"/> | First name: | <input type="text"/> |
| Last name: | <input type="text"/> | | |
| Company (optional): | <input type="text"/> | | |
| Unit: | <input type="text"/> | House number: | <input type="text"/> |
| | | House suffix: | <input type="text"/> |
| House name: | <input type="text"/> | | |
| Address 1: | <input type="text"/> | | |
| Address 2: | <input type="text"/> | | |
| Address 3: | <input type="text"/> | | |
| Town: | <input type="text"/> | | |
| County: | <input type="text"/> | | |
| Country: | <input type="text"/> | | |
| Postcode: | <input type="text"/> | | |

2. Agent Name and Address

| | | | |
|---------------------|----------------------|---------------|----------------------|
| Title: | <input type="text"/> | First name: | <input type="text"/> |
| Last name: | <input type="text"/> | | |
| Company (optional): | <input type="text"/> | | |
| Unit: | <input type="text"/> | House number: | <input type="text"/> |
| | | House suffix: | <input type="text"/> |
| House name: | <input type="text"/> | | |
| Address 1: | <input type="text"/> | | |
| Address 2: | <input type="text"/> | | |
| Address 3: | <input type="text"/> | | |
| Town: | <input type="text"/> | | |
| County: | <input type="text"/> | | |
| Country: | <input type="text"/> | | |
| Postcode: | <input type="text"/> | | |

3. Site Address Details

Please provide the full postal address of the application site.

| | | | | | |
|---|----------------------|---------------|----------------------|---------------|----------------------|
| Unit: | <input type="text"/> | House number: | <input type="text"/> | House suffix: | <input type="text"/> |
| House name: | <input type="text"/> | | | | |
| Address 1: | <input type="text"/> | | | | |
| Address 2: | <input type="text"/> | | | | |
| Address 3: | <input type="text"/> | | | | |
| Town: | <input type="text"/> | | | | |
| County: | <input type="text"/> | | | | |
| Postcode (optional): | <input type="text"/> | | | | |
| Description of location or a grid reference. (must be completed if postcode is not known): | | | | | |
| Easting: | <input type="text"/> | Northing: | <input type="text"/> | | |
| Description: | | | | | |

4. The Proposed Excavation/Waste Deposition

What is the area of the proposed works? (Please give your answer in either square metres or hectares and specify which)

| | |
|----------------------|--|
| <input type="text"/> | Square metres/hectares (delete as appropriate) |
|----------------------|--|

What is the approximate total volume of the proposed works: Cubic metres

Please provide a detailed description of the proposed works:

Have previous excavations or waste deposits been carried out? ☐ Yes ☐ No

If Yes, please provide the total area of the previous works: Square metres/hectares

Please state the size and number of the holding:

| | | | |
|------|----------------------|--------|----------------------|
| Size | <input type="text"/> | Number | <input type="text"/> |
|------|----------------------|--------|----------------------|

Please state the depth of excavation, landfilling or height of landrasing:

Would any excavated material be retained within the agricultural holding? ☐ Yes ☐ No

Please describe the materials that any waste brought onto the land from elsewhere would be composed of (e.g. top soil, sub soil, demolition waste, rubble etc).

Would the works affect any watercourse, surface or groundwater (e.g. infilling of old ponds, diversion or damming of streams, rivers, brooks or drains, creation of lakes)? ☐ Yes ☐ No

If Yes, please describe:

5. Agricultural and Forestry Developments

What is the total area of the entire agricultural unit? Square metres/Hectares (delete as appropriate).

What is the area of the parcel of land where the development is to be located? Please tick only one box:

| | | |
|--|---|--|
| <input type="checkbox"/> 1 hectare or more | <input type="checkbox"/> Less than 1 hectare but at least 0.4 hectare | <input type="checkbox"/> Less than 0.4 hectare |
|--|---|--|

How long has the land on which the proposed development would be located been in use for agriculture for the purposes of a trade or business? Years: Months:

Is the proposed development reasonably necessary for the purposes of agriculture? ☐ Yes ☐ No

If Yes, please explain why:

Is the proposed development designed for the purposes of agriculture? ☐ Yes ☐ No

If Yes, please explain why:

Does the proposed development involve any alteration to a dwelling? ☐ Yes ☐ No

Is the proposed development more than 25 metres from a metalled part of a trunk or classified road? ☐ Yes ☐ No

Is the proposed development within 3 kilometres of an aerodrome? ☐ Yes ☐ No

What is the height of the proposed development? metres ☐ Not applicable

Would the proposed development affect an ancient monument, archaeological site or listed building or would it be within a Site of Special Scientific Interest or a local nature reserve? ☐ Yes ☐ No

If Yes please provide details:

6. Planning Application Requirements - Checklist

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

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

☐

The correct fee:

☐

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

*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.

7. 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.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

(date cannot be pre-application)

8. Applicant Contact Details

Telephone numbers

| | | |
|----------------------|----------------------|----------------------|
| Country code: | National number: | Extension number: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|----------------------|---------------------------|
| Country code: | Mobile number (optional): |
| <input type="text"/> | <input type="text"/> |

| | |
|----------------------|------------------------|
| Country code: | Fax number (optional): |
| <input type="text"/> | <input type="text"/> |

Email address (optional):

9. Agent Contact Details

Telephone numbers

| | | |
|----------------------|----------------------|----------------------|
| Country code: | National number: | Extension number: |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

| | |
|----------------------|---------------------------|
| Country code: | Mobile number (optional): |
| <input type="text"/> | <input type="text"/> |

| | |
|----------------------|------------------------|
| Country code: | Fax number (optional): |
| <input type="text"/> | <input type="text"/> |

Email address (optional):

10. 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: