

# Newport City Council

22/8/11

706091

£6270

No 11

0800

Newport City Council  
Environment and the Town  
Civic Centre  
Cathedral Road  
Newport NP20 1UR  
01693 56656  
www.newport.gov.uk



## Application for Planning Permission Town and Country Planning Act 1990

### Publication of planning applications on council websites

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

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   | H |
| Last name          | EDWARDS        |              |   |
| Company (optional) |                |              |   |
| Unit               | House number   | House suffix |   |
| House name         | NEW DAIRY FARM |              |   |
| Address 1          |                |              |   |
| Address 2          |                |              |   |
| Address 3          |                |              |   |
| Town               | ST BRIDGES     |              |   |
| County             | NEWPORT        |              |   |
| Country            |                |              |   |
| Postcode           | NP10 8SF       |              |   |

### 2. Agent Name and Address

|                    |                            |              |     |
|--------------------|----------------------------|--------------|-----|
| Title              | MR                         | First name   | J A |
| Last name          | HODGIE                     |              |     |
| Company (optional) | CANBERRA DESIGN ASSOCIATES |              |     |
| Unit               | House number               | House suffix |     |
| House name         | HAFAN HEULOG               |              |     |
| Address 1          |                            |              |     |
| Address 2          |                            |              |     |
| Address 3          |                            |              |     |
| Town               | DREYLWYN                   |              |     |
| County             | CARMARTHENSHIRE            |              |     |
| Country            |                            |              |     |
| Postcode           | SA32 8SA                   |              |     |

### 3. Description of the Proposal

Please describe the proposed development including any change of use

TO EXTEND EXISTING MULTI PURPOSE STORAGE BUILDING IN 3 PARTS -

- ① 1524 W x 7552 L x 5500 H TO EAVES (7542 TO RIDGE)
- ② 9144 W x 32004 L x 4115 H TO EAVES (5340 TO RIDGE)
- ③ 7315 W x 41148 L x 4115 H TO EAVES (5095 TO RIDGE)

TO RETAIN AS BUILT EXTENSION TO MILKING PARLOUR

- ④ 7315 W x 22860 L x 5500 H TO EAVES (6480 TO RIDGE)

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)

#### 4. 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                                                                               | NEW DAIRY FARM       |              |                      |              |                      |
| Address 1                                                                                | <input type="text"/> |              |                      |              |                      |
| Address 2                                                                                | <input type="text"/> |              |                      |              |                      |
| Address 3                                                                                | <input type="text"/> |              |                      |              |                      |
| Town                                                                                     | ST BRIDGES           |              |                      |              |                      |
| County                                                                                   | NEWPORT              |              |                      |              |                      |
| Postcode (optional)                                                                      | NP10 8SF             |              |                      |              |                      |
| Description of location or a grid reference (must be completed if postcode is not known) |                      |              |                      |              |                      |
| Easting                                                                                  | <input type="text"/> | Northing     | <input type="text"/> |              |                      |
| Description                                                                              |                      |              |                      |              |                      |
| <input type="text"/>                                                                     |                      |              |                      |              |                      |

#### 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?

#### 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

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. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste?

☐ Yes

☒ No

If Yes please provide details

Have arrangements been made for the separate storage and collection of recyclable waste?

☒ Yes

☐ No

If Yes please provide details

TO EXISTING SURRY  
STORAGE TANK ADJACENT  
TO PROPOSED SITE  
(NOTED ON PLAN - DRAN° 0823/01)

#### 8. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal?

☐ Yes

☒ No

If Yes please provide details

#### 9. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council?

☐ Yes

☒ No

If Yes please provide details

**GRANTED**

## 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            | Drawing<br>references if<br>applicable |
|---------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|----------------------------------------|
| Walls                                       |                                | BDSHEETS (DARK GREEN)<br>(EAST & WEST ELEVATIONS)<br>YORKSHIRE BOARDING OVER<br>F/F MASONRY OR P/C PANELS | <input type="checkbox"/>            | <input type="checkbox"/> | 0828/02<br>& /03                       |
| Roof                                        |                                | CEMENT FIBRE (PIC 6)<br>GREY + TRANSLUCENT<br>ROOFLIGHTS (1 PER SIDE/DAY)                                 | <input type="checkbox"/>            | <input type="checkbox"/> | 0828/01<br>/02 & /03                   |
| Windows                                     |                                |                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Doors                                       |                                | GALVANIZED STEEL<br>DOORS (NATURAL<br>COLOUR)                                                             | <input type="checkbox"/>            | <input type="checkbox"/> | 0828/02<br>& /03                       |
| Boundary treatments<br>(e.g. fences, walls) |                                |                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Vehicle access and<br>hard-standing         |                                |                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Lighting                                    |                                |                                                                                                           | <input checked="" type="checkbox"/> | <input type="checkbox"/> |                                        |
| Others<br>(please specify)                  |                                |                                                                                                           | <input checked="" 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

0828/01<sup>A</sup> /02 /03 + 05 EXTRACT (1:10000)  
+ DESIGN ACCESS STATEMENT E F

## 11. Vehicle Parking

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) | Difference<br>in spaces |
|--------------------------------------------------|-------------------|-----------------------------------------------|-------------------------|
| Cars                                             |                   |                                               |                         |
| Light goods vehicles/<br>public carrier vehicles |                   |                                               |                         |
| Motorcycles                                      |                   |                                               |                         |
| Disability spaces                                |                   |                                               |                         |
| Cycle spaces                                     |                   |                                               |                         |
| Other (e.g. Bus)                                 |                   |                                               |                         |
| Other (e.g. Bus)                                 |                   |                                               |                         |

NOT APPLICABLE

GRANTED

## 12. Foul Sewage

Please state how foul sewage is to be disposed of

- ☐ Mains sewer ☐ Cess pit  
☐ Septic tank ☐ Other  
☐ Package treatment plant

Are you proposing to connect to the existing drainage system? ☐ 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 C1 and C2 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?

- ☐ Sustainable drainage system ☐ Existing watercourse  
☐ Soakaway ☐ Pond/lake  
☐ Main sewer (Ex SITE SYSTEM)

## 14. Biodiversity and Geological Conservation

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

VACANT

Is the site currently vacant? ☒ Yes ☐ No

If Yes please describe the last use of the site

NOT KNOWN

When did this use end (if known)?

DD/MM/YYYY NOT KNOWN  
(date where known may be approximate)

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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

**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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

| 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"/> |                    |   |   |    |         |       |
| <b>Totals (a + b + c + d + e + f + g) =</b> |                          |                    |   |   |    |         |       |

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

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

**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

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                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Shops                               | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Net tradable area                   | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A2                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Financial and professional services | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| A3                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Restaurants and cafes               | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B1 (c)                              | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Light industrial                    | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B2                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| General industrial                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| B8                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Storage or distribution             | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| C1                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Hotels and halls of residence       | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| C2                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Residential institutions            | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| D1                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Non residential institutions        | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| D2                                  | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| Assembly and leisure                | <input checked="" type="checkbox"/> |                                                    |                                                                                     |                                                                                   |                                                                                |
| OTHER                               | <input type="checkbox"/>            | 2825                                               | N/A                                                                                 | 4701                                                                              | 1876                                                                           |
| Please specify                      | <input type="checkbox"/>            |                                                    |                                                                                     |                                                                                   |                                                                                |
| AGRICULTURAL APPLICATION            | <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 | Total rooms proposed (including changes of use) | Net additional rooms |
|-----------|--------------------------|-------------------------------------|----------------------------------------------------------|-------------------------------------------------|----------------------|
| C1        | Hotels                   | <input checked="" type="checkbox"/> |                                                          |                                                 |                      |
| C2        | Residential Institutions | <input checked="" type="checkbox"/> |                                                          |                                                 |                      |
| Other     | Hostels                  | <input checked="" type="checkbox"/> |                                                          |                                                 |                      |

**20. Employment**

Please complete the following information regarding employees

|                    | Full-time | Part time | Total full time equivalent |
|--------------------|-----------|-----------|----------------------------|
| Existing employees | 7         | 2         | 8                          |
| Proposed employees | 2         |           | 2                          |

**21. 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 |
|-----|------------------|----------|--------------------------|-----------|
|     |                  |          |                          |           |
|     |                  |          |                          |           |
|     |                  |          |                          |           |

**22. Site Area**Please state the site area in ~~hectares~~ <sup>ares</sup>

6000

(NEW DAIRY FARM)

### 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.

MILKING PARLOUR PLUS  
MULTI PURPOSE ANIMAL HOUSING.

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

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

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)