

Application for Planning Permission

Urgent Crown Development

Town and Country Planning (Crown Development) (Urgent Applications)
(England) Order 2025

1. Applicant Information

Title: First name:

Last name:

Department:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

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"/>

Email address (optional):

2. Agent Information

Title: First name:

Last name:

Company (optional):

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

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"/>

Email address (optional):

3. Description of the Proposal

Please describe the proposed development, including any change of use:

Has the development or change of use already started? Yes No

If Yes, please state the date when development, or use were started (DD/MM/YYYY): (date must be pre-application submission)

Has the development, or change of use been completed? Yes No

If Yes, please state the date when the development 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.

Units	<input type="text"/>	House/ Unit Number:	<input type="text"/>	House Suffix:	<input type="text"/>
Site 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 grid reference.
(must be completed if postcode is not known):

Easting: Northing:

Description:

5. 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 plan(s)/drawing(s) and state the reference of the plan(s)/ drawing(s)

6. 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:

7. Listed Building

Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic Interest? (Note: only one box must be ticked)

Grade 1 Ecclesiastical Grade I

Grade II* Ecclesiastical Grade II*

Grade II Ecclesiastical Grade II

Don't Know

Do the proposal include alterations to a listed building? Yes No

8. Materials

If applicable, 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
Walls				
Roof				
Windows				
Doors				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard-standing				
Lighting				
Others (please specify)				

9. 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			
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces			
Cycle spaces			
Other (e.g. Bus)			
Other (e.g. Bus)			

10. 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):

11. 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 for information as necessary.)

Yes No

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

12. 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

13. Existing Use

Please describe the current use of the site:

Is the site currently vacant? Yes No

If Yes, please describe the last use of the site:

When did this use end (if known)?
DD/MM/YYYY

(date where known may be approximate)

Land which is known to be contaminated? Yes No

Land where contamination is suspected for all or part of the site? A proposed use that would be particularly vulnerable to the presence of contamination?

Yes No

Yes No

14. 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 Tree Survey, at the discretion of Secretary of State for Housing Communities and Local Government. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application.

15. 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

16. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units?
If Yes, please provide details below:

Yes

No

17. 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)
B2 – General Industrial (other than falling within Class E)		<input type="checkbox"/>				
B8 – Storage and Distribution		<input type="checkbox"/>				
C1 – Hotels		<input type="checkbox"/>				
C2 – Residential Institutions		<input type="checkbox"/>				
C2A – Secure Residential Institutions		<input type="checkbox"/>				
E - Commercial, Business and Service:	(a) retail (other than hot food)	Shops	<input type="checkbox"/>			
		Net tradeable area:	<input type="checkbox"/>			
	(b) sale of food and drink (mostly consumed on the premises)		<input type="checkbox"/>			
	(c) (i) Financial services		<input type="checkbox"/>			
	(c) (ii) Professional services (other than health or medical)		<input type="checkbox"/>			
	(c) (iii) any other service		<input type="checkbox"/>			
	(d) Indoor sports, recreation or fitness		<input type="checkbox"/>			
	(e) medical or health services		<input type="checkbox"/>			
	(f) creche, day nursery		<input type="checkbox"/>			
	(g) (i) office (to carry out operational or administrative functions)		<input type="checkbox"/>			
	(g) (ii) research and development of products or processes		<input type="checkbox"/>			
	(g) (iii) any industrial process (can be carried out within a residential area)		<input type="checkbox"/>			
F.1 - Learning and non-residential institutions:	(a) Education		<input type="checkbox"/>			
	(b) display works of art		<input type="checkbox"/>			
	(c) museum		<input type="checkbox"/>			
	(d) public library		<input type="checkbox"/>			
	(e) public hall or exhibition hall		<input type="checkbox"/>			
	(f) public worship or religious instruction		<input type="checkbox"/>			
	(g) law court		<input type="checkbox"/>			
F.2 - Local Community	(a) Shop selling essential goods (premises not over 280 metres squared and no other such facility in 1000m radius)		<input type="checkbox"/>			
	(b) hall or meeting place for local community (principal use)		<input type="checkbox"/>			
	(c) outdoor sport or recreation		<input type="checkbox"/>			
	(d) indoor or outdoor swimming pool or skating rink		<input type="checkbox"/>			
Other – Please Specify						
		<input type="checkbox"/>				
Total						

17. All Types of Development: Non-residential Floorspace (Continued)

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 change of use)	Net additional rooms
C1 - Hotels	<input type="checkbox"/>			
C2 - Residential Institutions	<input type="checkbox"/>			
C2A - Secure Residential Institutions	<input type="checkbox"/>			
Other – Please specify:	<input type="checkbox"/>			

18. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent
Existing employees			
Proposed employees			

19. Hours of Operation

Please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday	Saturday	Sunday and Bank Holidays	Not Known

20. Site Area

Please state the site are in hectares (ha):

21. 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:

Is the proposal a waste management development? Yes, No

If the answer is Yes, please complete the following table:

	Not applicab	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 type="checkbox"/>		
Non-hazardous landfill	<input type="checkbox"/>		
Hazardous landfill	<input type="checkbox"/>		
Energy from waste incineration	<input type="checkbox"/>		
Other incineration	<input type="checkbox"/>		
Landfill gas generation plant	<input type="checkbox"/>		
Pyrolysis/gasification	<input type="checkbox"/>		
Metal recycling site	<input type="checkbox"/>		
Transfer stations	<input type="checkbox"/>		
Material recovery/recycling facilities (MRFs)	<input type="checkbox"/>		
Household civic amenity sites	<input type="checkbox"/>		
Open windrow composting	<input type="checkbox"/>		
In-vessel composting	<input type="checkbox"/>		
Anaerobic digestion	<input type="checkbox"/>		
Any combined mechanical, biological and/or thermal treatment (MBT)	<input type="checkbox"/>		
Sewage treatment works	<input type="checkbox"/>		
Other treatment	<input type="checkbox"/>		
Recycling facilities construction, demolition and excavation waste	<input type="checkbox"/>		
Storage of waste	<input type="checkbox"/>		
Other waste management	<input type="checkbox"/>		
Other developments	<input 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 wasteplanning authority should make clear what information it requires on its website.

22. 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 (tonnes):

Acrylonitrile	<input type="text"/>	Ethylene oxide	<input type="text"/>	Phosgene	<input type="text"/>
Ammonia	<input type="text"/>	Hydrogen cyanide	<input type="text"/>	Sulphur dioxide	<input type="text"/>
Bromine	<input type="text"/>	Liquid oxygen	<input type="text"/>	Flour	<input type="text"/>
Chlorine	<input type="text"/>	Liquid petroleum gas	<input type="text"/>	Refined white sugar	<input type="text"/>
Other:	<input type="text"/>	Other:	<input type="text"/>		
Amount:	<input type="text"/>	Amount:	<input type="text"/>		

23. 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 Secretary of State for Housing Communities and Local Government has been submitted.

- | | | | |
|--|--------------------------|--|--------------------------|
| Completed and dated application form: | <input type="checkbox"/> | The correct fee: | <input type="checkbox"/> |
| Plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | <input type="checkbox"/> | A statement setting out the reasons the appropriate authority considers that the development to which the application relates is of national importance and urgent | <input type="checkbox"/> |
| Any other plans and drawings or information necessary to describe the subject of the application: | <input type="checkbox"/> | A statement setting out the reasons the applicant is the 'appropriate authority' as defined in section 293 of the Town and Country Planning Act 1990 | <input type="checkbox"/> |
| Where the application is made by a person authorised in writing by the appropriate authority, a copy of that authorisation: | <input type="checkbox"/> | A statement to explain whether the appropriate authority consider that the application contains 'sensitive information' and setting out the reasons to explain why the appropriate authority considers the information sensitive | <input type="checkbox"/> |

24. 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

(date cannot be pre-application)

