

Application for Permission in Principle

Town and Country Planning Act 1990

Town and Country Planning (Permission in Principle) (Amendment) Order 2017

Permission in principle may be granted for minor housing-led development only. Article 5B of the Permission in Principle (Amendment) Order 2017 sets out development that is specifically excluded from a grant of permission in principle and this includes habitats and EIA development.

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to a Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to a Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

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.

Find contact details for Local Planning Authorities: <https://www.planningportal.co.uk/lpasearch>

If printed, please complete using block capitals and black ink.

1. Applicant Name and Address

Title:		First name:	V
Last name:	NOVOZHILOVA		
Company (optional):			
Unit:		Number:	
Building name:			
Address 1:	DOWNSVIEW NURSERIES		
Address 2:	NEW HALL LANE		
Address 3:			
Town:	SMALL DOLE		
County:			
Country:			
Postcode:	BN5 9YJ		

2. Agent Name and Address

Title:		First name:	
Last name:			
Company (optional):	SPEER DAD		
Unit:		Number:	29
Building name:			
Address 1:	KINGS DRIVE		
Address 2:			
Address 3:			
Town:	HASSOCKS		
County:			
Country:			
Postcode:	BN6 8DX		

3. Description of the proposed development including any non-residential development

ERECTION OF A DWELLING AND ASSOCIATED
DEVELOPMENT

Net number
of dwellings:

Min:

1

Max:

1

Amount of non-residential
use(s) (e.g. floorspace or area):

(Can be expressed as a range, a maximum or a fixed amount)

4. Site information

Description and amount of existing use(s) of site:

STORAGE

Site Area (hectares):

0.29

If you propose to attach any supporting information relating to known or likely constraints on the site please briefly describe what information you intend to provide.

5. Site Address Details

Please provide the full postal address of the application site.

Unit:

House

number:

House

suffix:

House
name:

Address 1:

DOWNSVIEW NURSERIES

Address 2:

NEW HALL LANE

Address 3:

Town:

SMALL DOLE

County:

Postcode (optional):

BN5 9YJ

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

Easting:

Northing:

Description:

6. Authority Employee / Member

It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.

Do any of the following statements apply to you and/or agent?

☐ Yes

☒ No

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

If Yes, please provide details of their name, role and how you are related to them

7. Declaration

I/We hereby apply for permission in principle as described in this form. 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

SPEER DADE PLANNING CONSULTANTS

Date (DD/MM/YYYY):

(date cannot be pre-application)

29 / 04 / 2026

8. 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:



The correct fee:



Any supporting information:



9. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address:

10. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address: