KNOWSLEY

PLANNING APPLICATION

TOWN AND COUNTRY PLANNING ACT 1990

00/00663/FUL

23 OCT 2000

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1 APPLICANT (BLOCK CAPITALS PLEASE)

Name KODAK LTD.

Address Acornfield Road
Kirkby
Liverpool

Postcode L33 7UF

Tel No [redacted] **Fax No** [redacted]

2 AGENT (IF ANY)

Name Robert Campbell

Address Haden Freeman Ltd
P.O. Box 52
Hyde Park House
Hyde Cheshire

Postcode SK 14 4UL

Tel No [redacted] **Fax No** [redacted]

3 FULL POSTAL ADDRESS OR LOCATION OF THE APPLICATION SITE

Kodak Ltd (Building 82)
Acornfield Road
Kirkby Liverpool L33 7UF.

4 SIZE OF SITE

30 sq. metres (7½ × 4 metres)

Edge in red on submitted location plan

5 ADJOINING LAND

State whether the applicant owns or controls any adjoining land. If yes, this area should be edged in blue on the location plan. YES / ~~NO~~

6 BRIEF DESCRIPTION OF PROPOSED WORKS/CHANGE OF USE

Modification of existing vent scrubbing system.

Planning Knowsley M.B.C.
23 OCT 2000
Planning Services Division

7 PROPOSAL

Does the proposal involve:

(a) **New residential units** ~~YES~~ / NO
If YES, state number of units.

(b) **Other new buildings** ~~YES~~ / NO
If YES, state number of units

(c) **Alteration or extension** YES / ~~NO~~

(d) **Change of use** ~~YES~~ / NO

(e) **Construction of a new access to a highway** ~~YES~~ / NO
If YES ... vehicular/pedestrian

(f) **Alteration to an existing access to a highway** ~~YES~~ / NO
If YES ... vehicular/pedestrian

(g) **Demolition** ~~YES~~ / NO
If YES, please indicate on submitted plans buildings to be demolished

(h) **Change in ground levels** ~~YES~~ / NO
If YES, sections of existing and proposed levels should be submitted.

8 EXISTING USES

Please state:

(a) **Present use of buildings/land:**
Chemical manufacturing plant.

(b) **If vacant, the last previous use:**

(c) **Date when last used, if known:**

9 TYPE OF APPLICATION

Please tick the box which describes the type of application you are submitting (a, b, c, d or e).

(a) Outline for new buildings ☐

If outline, tick which of the matters listed below are reserved for subsequent approval:

- *i. Siting*
- *ii. Design*
- *iii. External appearance*
- *iv. Means of Access*
- *v. Landscaping*

(b) Full Application for Change of Use and/or New Building/Engineering Works ✓

(c) Reserved Matters ☐

If application for reserved matters, tick the matters for which approval is now sought:

- *i. Siting*
- *ii. Design*
- *iii. External appearance*
- *iv. Means of Access*
- *v. Landscaping*

Reference Number of approved outline

(d) Removal or Variation of Condition ☐

Please give the date and number of previous permission and, where relevant, identify the particular condition:

- *i. Date*
- *ii. Ref. No. of previous permission*
- *iii. Condition(s)*

(e) Renewal of a Temporary Permission ☐

Please give the date and number of previous permission:

- *i. Date*
- *ii. Ref. No. of previous permission*

10 NON RESIDENTIAL DEVELOPMENT

Is the application for:

(a) Industrial	YES / ~~NO~~
(b) Office	~~YES~~ / NO
(c) Warehousing	~~YES~~ / NO
(d) Storage	~~YES~~ / NO
(e) Shopping	~~YES~~ / NO

If you have answered YES to any of these questions complete part 2 of these forms.

11 DRAINAGE

Please state how surface water (SW) and foul sewerage (FW) will be disposed of by ticking the appropriate box

	SW	FW
- Mains drains	✓	
- Watercourses		
- Soakaway		
- Other		

(if other, please give details below)

As existing, no new arisings.

12 TREES

Do you propose to fell any trees? ~~YES~~ / NO

If YES, indicate the position of the trees to be felled on the plan(s).

13 HEIGHT OF BUILDING

Please state in metres the maximum height of the proposed building(s) above ground level (where known). 28 metres.

14 DECLARATION

I/WE submit this application and attach the necessary plans

AND I/WE attach a completed ownership certificate

AND I/WE enclose a fee of £ 190

Signed [redacted]

On behalf of Kodak Ltd. **Date** 19th October 2000

FOR OFFICIAL USE ONLY

Fee received £

cash/cheque/PO

Receipt No.

Date Received

Initials

Assessed Fee

[redacted]

KNOWSLEY
METROPOLITAN BOROUGH

PART 2

APPLICATION NO: For office use only

ADDITIONAL INFORMATION REQUIRED IN RESPECT OF APPLICATIONS FOR INDUSTRIAL, OFFICE, WAREHOUSING, STORAGE OR SHOPS

Please answer all questions relevant to the proposed development. (Where space available is insufficient please attach a separate note).

A *IN THE CASE OF INDUSTRIAL DEVELOPMENTS*

i. **What processes would be carried out?** Improved scrubbing of acidic vapours.

ii. **What end products are involved?** Existing vapour discharges to atmosphere

iii. **What types of plant or machinery would be used?** Caustic scrubbing columns.

B *TOTAL FLOOR SPACE*

	Existing Floorspace	Existing Floorspace to be demolished	Total proposed floorspace of building (including existing space to be retained and any proposed)
i. What is the total floorspace of all buildings to which the application relates?			
ii. What is the amount of industrial floorspace in the above figure?			
iii. What is the amount of office floorspace?			
iv. What is the amount of floorspace for retail trading?			
v. What is the amount of floorspace for storage?			

Not applicable

Please indicate clearly on the plans all floorspace intended for the above purposes and all external production or storage areas.

C *EMPLOYMENT*

	(a) Office	(b) Industrial	(c) Other Staff
i. How many (a) office, (b) industrial and (c) other staff would be employed on the site?			
ii. If you have existing premises on the site, how many of the employees would be new staff?			
iii. If you propose to transfer staff from other premises please give details of the numbers involved.			

Not applicable.

D *PHASED PROPOSALS*

If the proposal forms a stage in a larger scheme for which planning permission is not at present sought, please give what information you can about the ultimate developments.

Not applicable.

E *EXISTING PREMISES*

i. **Is the proposal related to an existing use on or near the site or elsewhere?** YES ✓ NO

If YES, please describe the relationship and give location.

Existing scrubbing plant is to be replaced by more efficient units.

E *EXISTING PREMISES*

ii. **Is this a proposal to replace existing premises in this area or elsewhere which have become obsolete, inadequate or otherwise unsatisfactory?** YES ☐ NO ✓

If YES, please give the following details:

(a) Location (a)

(b) Gross floor area of such premises (b)

(c) Your intentions in respect of those premises (c)

F *HOURS OF WORKING* No change.

Please specify the proposed hours of work/opening:

Monday: **Friday:**

Tuesday: **Saturday:**

Wednesday: **Sunday:**

Thursday:

G *VEHICULAR TRAFFIC* No change.

Please state the estimated numbers and types of the following categories of vehicles travelling to and from the site during the working day.

i. **Vehicles delivering goods or raw materials to the site** i.

ii. **Vehicles taking goods or finished products from the site** ii.

iii. **Customer vehicles** iii.

iv. **Employees vehicles** iv.

v. **Other vehicles** v.

H *PARKING / SERVICING*

What provisions have been made for the parking, loading and unloading of vehicles within the curtilage of the site? No change.

(Please show the location of all parking areas on the submitted plans for operational needs (ie. loading, unloading, employees/staff parking and customer/visitor parking and those for disabled persons vehicles).

I *REFUSE AND EFFLUENT DISPOSAL*

i. **Please state the nature of all waste materials, effluents, or refuse likely to be generated at the site.** i. As existing, gaseous effluents reduced.

ii. **Please state the likely amounts of the various types of waste material to be generated at the site.** ii. No new waste

iii. **Please state how you propose to dispose of each type of waste material likely to be generated at the site and indicate all refuse collection areas on the submitted plans.** iii. No change.

J *HAZARDOUS SUBSTANCES*

Will the proposed development involve the use or storage of any of the substances of the type and quantity listed as hazardous substances and controlled quantities in the Planning (Control of Major Accident Hazards) Regulations 1999 (see enclosed notes): YES ☐ NO ✓

If YES, please specify the type and quantity of each substance:

Details: