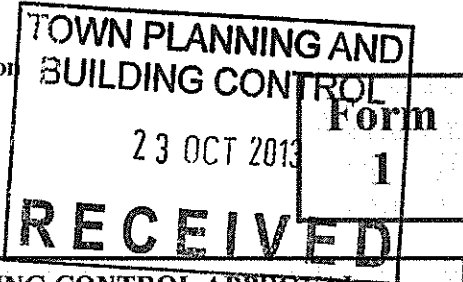




Secretary
Development and Planning Commission
Suite 631
Europort
Gibraltar

Tel: 350 20075483 Fax: 350 20074086



APPLICATION FOR PLANNING AND BUILDING CONTROL APPROVAL
Under Sections 17 and 18 of the Town Planning Act, 1999 and Section 45 of the Public Health Act

Please read the **guidance notes** and complete in block letters. For **Outline Planning Applications** return **5 copies** of this form and of the plans, for **Planning/Building Control Approval applications** return **8 copies** (in both cases 1 set to be at A1 and the remainder at A3 size) to the above address.

<p>1 Applicant's name and address (Not Agent):..... GHA / Technical Services Department / Government of Gibraltar</p> <p>Tel No:..20072355... Fax No..... Email:.....</p>	<p>2. Name and address of Agent:..... Gino Matto, Senior Architect, Technical Services Department, Secretaries Lane Gibraltar</p> <p>Tel No:..20059812..... Fax No 20040386. Email:.....gino.matto@gibraltar.gov.gi.....</p>
<p>3 Location of proposed works Primary Care Centre, Second Floor, ICC, 2^a Main Street, Gibraltar</p> <p>Property No, CP/FP:.....</p>	<p>4 Status of applicant (tick appropriate box):</p> <p>Freeholder <input type="checkbox"/> Leaseholder <input checked="" type="checkbox"/> Tenant <input type="checkbox"/> Other (Please Specify) <input type="checkbox"/></p>
<p>5 Application Type (Please tick box):</p> <p>Outline Planning Application <input type="checkbox"/> Planning/Building Control Application <input checked="" type="checkbox"/></p>	<p>6 Previous Permission:</p> <p>If this is an application for a permit following the grant of outline planning permission, please state reference number of approved outline planning application:</p> <p>BA.....N/A.....</p>
<p>7 Description of Development (briefly describe proposals:.. Carry out minor internal alterations and to construct an extension on the second floor terrace to provide additional clinics within the Primary Care Centre</p> <p>Tick box if development involves:</p> <p>New build <input type="checkbox"/> Demolition <input type="checkbox"/> New access to highway <input type="checkbox"/> Change of use <input type="checkbox"/> Alterations/extension <input checked="" type="checkbox"/> Altered access to highway <input type="checkbox"/></p>	
<p>8 Estimated cost of works: Approx £50,000.....</p>	<p>9 Owner of building or land (Name and address):</p> <p>(a) Freeholder: Land property Services Gibraltar Suite 6b, Leanse Place Gibraltar</p> <p>(a) Leascholder: Bari Properties Limited, PO Box 146 suite 12 Don House, 30/38 Main Street Gibraltar</p>
<p>10 Use of existing building or land:</p> <p>State the current use of the site:.. Primary Care Centre for the GHA.</p> <p>If vacant state last use:.....</p>	

<p>11 Density of development (Floor Space Index): Not Applicable</p> <p>Aggregate area of floor space within building:.....Second floor 2369sq.m</p>	<p>12 State total number of parking spaces:</p> <p>Existing:Existing multistorey car park..</p> <p>Proposed:No change.....</p>																																																		
<p>13 Percentage of plot covered by:</p> <p>(a) Existing building:..... N/A</p> <p>(b) Proposed building:..... N/A</p>	<p>14 Height of building: State overall height of proposed building(s) in metres:</p> <p>Existing ICC Building - at Main Street 3 floors</p> <p>Proposed Extension 3m above the second floor terrace</p>																																																		
<p>15 Environmental Impact Assessment:</p> <p>Does your proposal, require the submission of an Environmental Impact Assessment under the Town Planning (Environmental Impact Assessment) Regulations 2000? YES/NO</p> <p style="text-align: center;">YES</p>																																																			
<p>16 Felling of trees:</p> <p>Please tick box if development involves the felling of tree(s) and show species and location on plan. <input type="checkbox"/></p>	<p>17 Drainage: Method of surface & foul water drainage (tick box)</p> <p>New <input type="checkbox"/> Existing <input checked="" type="checkbox"/></p>																																																		
<p>18 Floor space</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 25%;">Use</th> <th style="width: 25%;">Existing sq m</th> <th style="width: 25%;">Proposed sq m</th> <th style="width: 25%;">Total sq m</th> </tr> </thead> <tbody> <tr> <td>Residential</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Industrial</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Office</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Shop / Café</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Storage/distribution</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Other (please specify)</td> <td>2nd Fl. Healthcare 2369sq.m.</td> <td>2nd Fl. Healthcare 31sq.m.</td> <td>2400sq.m.</td> </tr> <tr> <td>Total</td> <td>12369sq.m.</td> <td>31sq.m.</td> <td>2400sq.m.</td> </tr> </tbody> </table>				Use	Existing sq m	Proposed sq m	Total sq m	Residential				Industrial				Office				Shop / Café				Storage/distribution				Other (please specify)	2 nd Fl. Healthcare 2369sq.m.	2 nd Fl. Healthcare 31sq.m.	2400sq.m.	Total	12369sq.m.	31sq.m.	2400sq.m.																
Use	Existing sq m	Proposed sq m	Total sq m																																																
Residential																																																			
Industrial																																																			
Office																																																			
Shop / Café																																																			
Storage/distribution																																																			
Other (please specify)	2 nd Fl. Healthcare 2369sq.m.	2 nd Fl. Healthcare 31sq.m.	2400sq.m.																																																
Total	12369sq.m.	31sq.m.	2400sq.m.																																																
<p>19 Residential type:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th rowspan="2">Housing Type</th> <th colspan="2">No of units</th> <th rowspan="2">Type of units</th> <th colspan="2">No of units</th> </tr> <tr> <th>Existing</th> <th>Proposed</th> <th>Existing</th> <th>Proposed</th> </tr> </thead> <tbody> <tr> <td>Detached</td> <td></td> <td></td> <td>1 bedroom</td> <td></td> <td></td> </tr> <tr> <td>Semi-detached</td> <td></td> <td></td> <td>2 bedroom</td> <td></td> <td></td> </tr> <tr> <td>Terraced</td> <td></td> <td></td> <td>3 bedroom</td> <td></td> <td></td> </tr> <tr> <td>Apartments</td> <td></td> <td></td> <td>4 bedroom</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td>Others</td> <td></td> <td></td> </tr> <tr> <td>Total</td> <td></td> <td></td> <td>Total</td> <td></td> <td></td> </tr> </tbody> </table>						Housing Type	No of units		Type of units	No of units		Existing	Proposed	Existing	Proposed	Detached			1 bedroom			Semi-detached			2 bedroom			Terraced			3 bedroom			Apartments			4 bedroom						Others			Total			Total		
Housing Type	No of units		Type of units	No of units																																															
	Existing	Proposed		Existing	Proposed																																														
Detached			1 bedroom																																																
Semi-detached			2 bedroom																																																
Terraced			3 bedroom																																																
Apartments			4 bedroom																																																
			Others																																																
Total			Total																																																

20 **Ownership details (see guidance notes)**

We need to know who owns the application site. If you do not own the site or if you only own part of it, we need to know the name(s) of the owner(s). We also need to be sure that any other owner(s) knows that you have made an application. Please read the attached guidance notes if in doubt.
If you are the sole owner of the whole site Certificate A will apply. Please tick the appropriate box below:

CERTIFICATE A

I certify that at the beginning of the period 21 days ending with the date of this application, nobody, except the applicant, was the owner(s) of any part of the land to which this application relates.

CERTIFICATE B

I certify that the applicant (or his agent) has given the requisite notice (Form S21A attached) to everyone else who, at the beginning of the period 21 days ending with the date of this application, was the owner of any part of the land to which the application relates, as listed below:

Owner's name	Address at which notice was served	Date on which notice was served
Land Property Services	Suite 6b, Leanse Place, Gibraltar	22.10.13
Bari Properties Limited	PO Box 146 suite 12 Don House, 30/38 Main Street Gibraltar	22.10.13

Continue on a separate sheet if necessary

21 **Public Participation** Some types of development are subject to public participation requirements under Section 19 of the Town Planning Act (referred to as "Section 19 developments"). Some common Section 19 developments include :construction of buildings more than 4m in height, extensions of one or more additional storeys where the height would exceed 4m, swimming pools, use of land as bar/restaurant (including fast food restaurants). For the complete list seek advice from the Town Planning Division or refer to the Town Planning (General Procedures) Regulations, 2001, that can be viewed at www.gibraltarlaws.gov.gi

If Section 19 applies you must:

- Place a notice (use form S19 attached) on site and this must remain for at least 14 days – you are advised to place the notice on site the same day the application is submitted. On completion of the 14 days, complete and submit the attached certificate (Form S19(Cert) attached).
- Place a notice (use form S19 attached) in the Gibraltar Gazette, a daily and weekly newspaper. Copies of each of the publications in which the notices are published must be submitted as soon as possible after their publication.

Tick the box if the proposal is a Section 19 development.

22 **Drawings** List all drawings, plans and other documents included with the application. **NB** Location and site plan **MUST** be included.
D101 Existing Site & Floor Plan. D102 Proposed Floor Plan. D103 Proposed Elevation & Montages.

I/we hereby apply for permission to carry out the development described in this application and accompanying plan(s) and documents. I understand that an initial fee is payable on acknowledgement with a further fee payable following the first inspection following the grant of Building Control approval.

SignedGino Matto, (Agent) on behalf of GHA / Technical Services Department / Government of Gibraltar
Date 22nd October 2013

113

Use this form to notify other 'owners' about your application

TOWN PLANNING ACT
NOTICE UNDER SECTION 21 OF AN APPLICATION FOR PLANNING PERMISSION

Proposed development at (a)...Primary Care Centre, Second Floor ICC, Main Street, Gibraltar..... I/we give notice that (b)..... GHA / Technical Services Dept. / Government of Gibraltar.....is applying to the Development and Planning Commission for planning permission to (c)..... Carry out minor internal alterations and to construct an extension on the second floor terrace to provide additional clinics within the Primary Care Centre.

Any owner* of the land who wishes to make representations about this application should write to the Development and Planning Commission at Suite 631 Europort within 21 days of the date of this notice. Any representations must include a statement confirming that the applicant has been provided with a copy of the representations and the date this was done.

Signed Gino Matto (Agent)

**On behalf ofGHA / Technical Services Dept. / GOG

Date22nd October 2013.

[Handwritten signature in blue ink]

* "owner" in relation to any land, means a person who is for the time being the owner in respect of the fee simple thereof or is entitled to a tenancy thereof.

**delete where appropriate.

Insert:

- (a) Address or location of the proposed development.
(b) Applicant's name.
(c) Description of the proposed development