

Application for Planning Permission for Crown Development Town and Country Planning Act 1990

Please complete using block capitals and black ink.

1. Applicant Name and Address

Title:	<input type="text"/>	First name:	<input type="text"/>
Last name:	<input type="text"/>		
Company (optional):	<input type="text" value="DfT, Defra, HMRC"/>		
Unit:	<input type="text"/>	House number:	<input type="text"/>
		House suffix:	<input type="text"/>
House name:	<input type="text"/>		
Address 1:	<input type="text" value="C/O Agent"/>		
Address 2:	<input type="text" value="30 Warwick Street"/>		
Address 3:	<input type="text"/>		
Town:	<input type="text" value="London"/>		
County:	<input type="text"/>		
Country:	<input type="text" value="United Kingdom"/>		
Postcode:	<input type="text" value="W1B 5NH"/>		

2. Agent Name and Address

Title:	<input type="text"/>	First name:	<input type="text"/>
Last name:	<input type="text"/>		
Company (optional):	<input type="text" value="Jones Lang LaSalle"/>		
Unit:	<input type="text"/>	House number:	<input type="text"/>
		House suffix:	<input type="text"/>
House name:	<input type="text"/>		
Address 1:	<input type="text" value="30 Warwick Street"/>		
Address 2:	<input type="text"/>		
Address 3:	<input type="text"/>		
Town:	<input type="text" value="London"/>		
County:	<input type="text"/>		
Country:	<input type="text" value="United Kingdom"/>		
Postcode:	<input type="text" value="W1B 5NH"/>		

3. Description of the Proposal

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

Retention of the existing buildings, Goods Vehicle parking spaces, entry lanes, refrigerated semi-trailers, staff car parking spaces, access, site infrastructure, utilities, hardstanding, landscaping and ancillary facilities and associated works; and ongoing use of the site for an Inland Border Facility and Border Control Post, operating 24 hours per day, seven days per week.

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):

01/07/2020

(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):

01/04/2021

(date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Units

House/ Unit Number:

House Suffix:

Site name:

Sevington Inland Border Facility

Address 1:

Link Road between Junction 10a M20 to A2070

Address 2:

Address 3:

Town:

Sevington

County

Kent

Postcode (optional)

TN25 6GE

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)

NA

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:

Please refer to the Operational Waste Management Strategy.

Have arrangements been made for the separate storage and collection of

☒ Yes☐ No

recyclable waste?

If Yes, please provide details:

Please refer to the Operational Waste Management Strategy.

7. Biodiversity Net Gain

Do you believe that, if the development is granted planning permission, the Biodiversity Gain Condition (as set out in [Paragraph 13 of Schedule 7A of the Town and Country Planning Act 1990](#)) would apply?

☐ Yes ☒ No

If No, please provide reasons, with reference to which exemptions or transitional arrangements you believe apply:

Development subject to the de minimis exemption (development below the threshold), as the development will not impact on any priority or other habitats.

If Yes, please provide information requested in 1-6 below:

1. Please provide the date the pre-development biodiversity value of onsite habitat(s) have been calculated: (this should be one of the following dates: i) the date of this application; or ii) an earlier proposed date).

2. Please provide the pre-development biodiversity value of onsite habitats on this date:

If a date earlier than the date of the submission of the planning application has been specified in 1, please provide reasons why this date has been used:

3. Has there been any loss (or degradation) of any onsite habitat(s), resulting from activities carried out before the date specified in 1. either:

☐ Yes

- on or after 30 January 2020 which were not in accordance with a planning permission; or
- on or after 25 August 2023 which were in accordance with a planning permission?

☐ No

If yes, please provide details including: the date immediately before this activity was carried out; the onsite biodiversity value on this date; and any supporting evidence (or reference to relevant document containing these details).

4. Please state the publication date of the biodiversity metric tool(s) used to calculate the onsite biodiversity value(s) in 2. (and if applicable 3.).

5. Does the application site have irreplaceable habitat(s) (corresponding to the descriptions in The Biodiversity Gain Requirements (Irreplaceable Habitat) Regulations 2024) which exist on land to which this application relates on the date specified in 1.

☐ Yes

☐ No

If yes, please provide a description of these and any further details (for example reference to relevant document):

6. Please confirm your application is accompanied by the following:

- The completed biodiversity metric tool(s) showing the calculation of the pre-development biodiversity value shown in 2. (and if applicable 3.) on the date specified in 1. (and if applicable 3.)
- Plan(s), showing onsite habitat(s) existing on the date specified in 1.; and
- If applicable, plan(s) showing onsite irreplaceable habitat(s) existing on the date specified in 1.

☐ Yes

Please provide details (for example reference to relevant document):

Note: Plans must be drawn to an identified scale, and showing the direction of North.

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	Corrugated metal sheeting and cladding.	No changes proposed.		
Roof	Metal sheeting.	No changes proposed.		
Windows	Glazing in modular office buildings.	No changes proposed.		
Doors	External doors in modular office buildings and metal roller doors in industrial units.	No changes proposed.		
Boundary treatments (e.g. fences, walls)	Security fencing and acoustic fencing.	No changes proposed.		
Vehicle access and hard-standing	Hardstanding.	No changes proposed.		
Lighting	External security lighting columns.	No changes proposed.		
Others (please specify)				

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:

Please refer to the DAS and drawings for all information.

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	357	357	0
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces	14	14	0
Cycle spaces	60	60	0
Other (e.g. Bus) Goods vehicles	984	984	0
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):

Please refer to the Flood Risk Assessment.

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 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

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

Please see Section 7 for Biodiversity Net Gain

13. Existing Use

Please describe the current use of the site:

The Site is currently occupied by an operational Inland Border Facility.

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)

Does the proposal involve any of the following?

If yes, you will need to submit an appropriate contamination assessment with your application.

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

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 your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. 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 design, demolition and construction - Recommendations'

15. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste?

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

☐ Yes ☒ No

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

NA

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									
Sui Generis			<input checked="" type="checkbox"/>	16,348	0	16,348	0		
Total				16,348	0	16,348	0		

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	941	0	819
Proposed employees	941	0	819

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
Sui Generis	24/7	24/7	24/7	

20. Site Area

Please state the site are in hectares (ha): 43.4

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:

NA

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. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application
form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

I certify/The appropriate authority certifies that on the day 21 days before the date of this application nobody except the appropriate authority was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**

NOTE: You should sign Certificate B, C or D, as appropriate, if the appropriate authority is not the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

* “owner” as defined in Article 2 of The Town and Country Planning (Crown Development Applications) (Procedure and Written Representations) Order 2025.

** “agricultural holding” has the meaning given by reference to the definition of “agricultural tenant” in section 65(8) of the Act.

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

I certify/ The appropriate authority certifies that I have/the appropriate authority has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates.

* “owner” as defined in Article 2 of The Town and Country Planning (Crown Development Applications) (Procedure and Written Representations) Order 2025.

** “agricultural tenant” has the meaning given in section 65(8) of the Town and Country Planning Act 1990

Name of Owner / Agricultural Tenant	Address	Date Notice Served
National Highways Limited	Company Secretary, Bridge House, 1 Walnut Tree Close, Guildford, Surrey, GU1 4LZ	20/06/2025
South Eastern Power Networks PLC	Newington House, 237 Southwark Bridge Road, London, SE1 6NP	20/06/2025
Kent County Council	Sessions House, County Hall, Maidstone, Kent, ME14 1XQ	20/06/2025

Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
	Jones Lang LaSalle	20/06/2025

23. Ownership Certificates and Agricultural Land Declaration (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

I certify/ The applicant certifies that:

- Neither Certificate A or B can be issued for this application
- All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

* “owner” as defined in Article 2 of The Town and Country Planning (Crown Development Applications) (Procedure and Written Representations) Order 2025.

** “agricultural tenant” has the meaning given in section 65(8) of the Town and Country Planning Act 1990

The steps taken were:

Name of Owner / Agricultural Tenant	Address	Date Notice Served

Notice of the application has been published in the following newspaper
(circulating in the area where the land is situated):

On the following date (which must not be earlier
than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

I certify/ The applicant certifies that:

- Certificate A cannot be issued for this application
- All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the appropriate authority has been unable to do so.

* “owner” as defined in Article 2 of The Town and Country Planning (Crown Development Applications) (Procedure and Written Representations) Order 2025.

** “agricultural tenant” has the meaning given in section 65(8) of the Town and Country Planning Act 1990

The steps taken were:

Notice of the application has been published in the following newspaper
(circulating in the area where the land is situated):

On the following date (which must not be earlier
than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

24. 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 Local Planning Authority has been submitted.

Completed and dated application form:	<input checked="" type="checkbox"/>	The correct fee:	<input checked="" type="checkbox"/>
Plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	<input checked="" type="checkbox"/>	Particulars or evidence which would be required by the relevant local planning authority (see Article 11 (2) (d) of the Order), and (if required): design and access statement, and fire statement:	<input checked="" type="checkbox"/>
Any other plans and drawings or information necessary to describe the subject of the application:	<input checked="" type="checkbox"/>	Completed and dated Certificates in relation to notice of applications (A, B, C or D – as applicable):	<input checked="" type="checkbox"/>
Where the application is made by a person authorised in writing by the appropriate authority, a copy of that authorisation:	<input checked="" type="checkbox"/>	A statement setting out the reasons the appropriate authority considers that the development to which the application relates is of national importance,	<input checked="" type="checkbox"/>

25. 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

Jones Lang Lasalle Limited

20/06/2025

(date cannot be pre-application)

26. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

27. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

28. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

☒ Yes

☐ No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

☒ Agent

☐ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Telephone number:

Email address:

