PLANNING & DEVELOPMENT DEPARTMENT

OLD WESLEYAN CHAPEL GARRISON LANE ST MARY'S ISLES OF SCILLY

TR21 0JD

IP-17-011

Telephone: [01720] 424350 Fax: [01720] 424317 Email: planning@scilly.gov.uk

Application for a Lawful Development Certificate for an Existing use or operation or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2015

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink. It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

| 1. Applicant Name and Address | | | | | | | |
|-------------------------------|-----------------------------|--|--|--|--|--|--|
| Title: | MS First name: LOUISE | | | | | | |
| Last name: | araman | | | | | | |
| Company (optional): | CAENWETHERS | | | | | | |
| Unit: | House number: House suffix: | | | | | | |
| House name: | CARNWEINERS CONVICE CONST | | | | | | |
| Address 1: | PELSTRY BAY | | | | | | |
| Address 2: | | | | | | | |
| Address 3: | | | | | | | |
| Town: | St. March S | | | | | | |
| County: | ISLES OF SALLY | | | | | | |
| Country: | UK | | | | | | |
| Postcode: | TRZI ONX | | | | | | |

| 2. Agent Name and Address | | | | | | | |
|---------------------------|-----------------------------|--|--|--|--|--|--|
| Title: | First name: | | | | | | |
| Last name: | | | | | | | |
| Company (optional): | | | | | | | |
| Unit: | House number: House suffix: | | | | | | |
| House name: | | | | | | | |
| Address 1: | | | | | | | |
| Address 2: | | | | | | | |
| Address 3: | | | | | | | |
| Town: | | | | | | | |
| County: | | | | | | | |
| Country: | | | | | | | |
| Postcode: | | | | | | | |

| 3. Site Address Details Please provide the full postal address Unit: House number: House number: Address 1: Address 2: Address 3: Town: ST MARI County: Postcode (optional): TRAI ON Description of location or a grid re (must be completed if postcode is | House suffix: House suffix: HOUSE SCILLY Eference. | | 4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) | | | | | | |
|--|---|--------------|---|--------------|---|---|--|--|--|
| Description: Carn wells Country | Northing: WS House | | | | | | | | |
| 5. Lawful Development Ce | rtificate - Interest In Lan | nd | | | | | | | |
| Please state the applicant's intere | | | | | | | | | |
| Owner: Yes No | 203500. | es . | No | | Occupier: | | | | |
| If Yes to Lessee or Occupier plea | se give details of the owner and | d stat | te whether the | ey have bee | n informed i | n writing of this application: Have they been informed | | | |
| Name | , | Α | Address in writing of the application Yes No | | | | | | |
| E GREATA IN | | | | | | | | | |
| If No to all the above, please giv | e name and address of anyone | you | know who has | | | | | | |
| Name | Address | Stat of t | te the nature their interest (if known) | State whe | ether they n informed application No | If No, please explain why not | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | 3 × | | , | | | | | | |
| | | | | | | | | | |
| 6. Authority Employee / N With respect to the Authority, I am (a) a member of staff (c) (b) an elected member (d) | | | Do any of th | nese stateme | ents apply to you? | | | | |
| If Yes, please provide details of t | he name, relationship and role | | | | | | | | |
| Katie Grahem | , kirsly Grald | n, | Helen | Perc | 2 | | | | |

| 7. Description of Use, Building Works or Activity | 8. Description of Existing Use, Building Works or Activity |
|--|---|
| Please state for which of these you need a lawful development certificate/building works (you must tick at least one option): | What is the existing site use(s) for which the certificate of lawfulness is being sought? Please fully describe each use and |
| An existing use: V Yes No | state which part of the land the use relates to: |
| Existing building works: | Secret Garden |
| An existing use, building work or activity in breach of a condition: | Bretod holdey Cottope |
| Being a use, building works or activity which is still going on at the date of this application | |
| If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to: | 2 Padside 2 Book houday Cttosse |
| | |
| 9. Grounds For Application For A Lawful Developmen | t Certificate |
| Please state under what grounds is the certificate sought (you must t | |
| The use began more than 10 years before the date of this applic | ration. |
| The use, building works or activity in breach of condition began | |
| The use began within the last 10 years, as a result of a change change of use requiring planning permission in the last 10 years. The building works (for instance, building or engineering works of this application. The use as a single dwelling house began more than four years. | of use not requiring planning permission, and there has not been a s. s) were substantially completed more than four years before the date before the date of this application. see of use or building work was not development, or that it benefited |
| | |
| If applicable, please give the reference number of any existing plant notice affecting the application site. Include its date and the numb | ning permission, lawful development certificate or enforcement er of any condition being breached: |
| Reference Condition Number: | Date (DD/MM/YYYY): (must be pre application submission) |
| Please state why a Lawful Development Certificate should be grante | |
| J. Tease state mily a Lamair of the property o | |
| 10. Information In Support Of A Lawful Development | : Certificate |
| When was the use or activity begun, or the building works substantially completed: In the case of an existing use or activity in breach of conditions has to the substantial of the dates, duration and any discontinuous application is based on the claim that a use or activity has | (date must be pre-application submission) (DD/MM/YYYY) there been any interruption? Inuance of the development which is the subject of this application. If been ongoing for a period of years, please state exactly when any |
| interruption occurred: | |
| | |
| In the case of an existing use of land, has there been any material ch of use of the land since the start of the use for which a certificate is If Yes please provide details? | nange Yes No |
| | |

| ŀ | Propo | sed F | lousi | ng | | | | Exist | ing H | ousir | ng | | |
|--------------------------|--------------------|--|-----------------------|----------|---------------|-------|--------------------------|--------|---------|---------|---------------|--------------|---|
| Г | Number of Bedrooms | | | | | Total | | Numh | er of f | Bedroo | ms | Tota | |
| - | 1 | 2 | 3 | 4+ | Unknown | Total | | 1 | 2 | 3 | 4+ | Unknown | |
| Market lousing | • | | | | | | Market Housing | | | | | | |
| louses | | | | | | а | Houses | | | | | | а |
| lats & Maisonettes | | | | | | ь | Flats & Maisonettes | | | | | | Ь |
| ive-Work Units | | | | | | С | Live-Work Units | | | | | | С |
| luster Flats | | | | | | d | Cluster Flats | | | | | | d |
| Sheltered Housing | | | | iê. | | е | Sheltered Housing | | | | | | е |
| Bedsit/Studios | | | | | | f | Bedsit/Studios | | | | | | f |
| Inknown | | | | | 2 | 9 | Unknown | | | | | | g |
| Market Hous | sing To | otal (a | + b + c | + d + e | +f+g)= | Α | Market Hous | ing T | otal (a | + b + c | +d+e | +f+g)= | E |
| Social Rented Housing | 1 | 2 | 3 | 4+ | Unknown | | Social Rented Housing | 1 | 2 | 3 | 4+ | Unknown | |
| louses | | | | | | a | Houses | | | | | | а |
| lats & Maisonettes | | | | | | ь | Flats & Maisonettes | | | | | | Ь |
| ive-Work Units | | | | | | C | Live-Work Units | | | | | | C |
| Cluster Flats | | | | | | d | Cluster Flats | | | | | | d |
| Sheltered Housing | | | | | | е | Sheltered Housing | | | | | | е |
| Bedsit/Studios | | | | | 1 | f | Bedsit/Studios | | | | | | f |
| Jnknown | | | | | | g | Unknown | | | | 1 | | g |
| Social Rented Hous | ing To | otal (a - | + <i>b</i> + <i>c</i> | + d + e | c + f + g = 0 | В | Social Rented House | sing T | otal (a | + b + c | $+d+\epsilon$ | c + f + g) = | F |
| ntermediate lousing | 1 | 2 | 3 | T | Unknown | | Intermediate Housing | 1 | 2 | 3 | 4+ | Unknown | |
| louses | | | | | | а | Houses | | | | | | а |
| Flats & Maisonettes | | | | 1 | | Ь | Flats & Maisonettes | | | | | | Ь |
| _ive-Work Units | | | | | | C | Live-Work Units | | | | | | C |
| Cluster Flats | | | | | | d | Cluster Flats | | | | | | C |
| Sheltered Housing | | - | | | | е | Sheltered Housing | | | | | | е |
| Bedsit/Studios | | | | - | | f | Bedsit/Studios | | | | | | 1 |
| Unknown | | | | | | g | Unknown | | | | | | 9 |
| Intermediate Hous | sing To | otal (a | + b + c | + d + e | e + f + g) = | C | Intermediate Hou | sing T | otal (a | + 6 + 6 | c+d+e | e+f+g)= | 6 |
| Key Worker Housing | 1 | 2 | 3 | 4+ | Unknown | | Key Worker Housing | 1 | 2 | 3 | 4+ | Unknown | |
| Houses | | | | | | , a | Houses | | | | | | 0 |
| Flats & Maisonettes | | | | | | b | Flats & Maisonettes | | | | | | t |
| Live-Work Units | | | | | | C | Live-Work Units | | | | | | |
| Cluster Flats | | | | | | d | Cluster Flats | | | | | | C |
| Sheltered Housing | | | 1 | 1 | | е | Sheltered Housing | | | | | | 6 |
| | | | - | 1 | | f | Bedsit/Studios | | | | | | |
| Bedsit/Studios | 1 | | | + | | | | | 1 | 1 | - | | 1 |
| Bedsit/Studios Unknown | | | | | | g | Unknown | | 1 | 1 | | | |

| 11. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed int the Local Planning Authority has been submitted. The burden or proof in a Lawful Development Certificate is firmly wit should be provided. | valid. It will not be considered valid until all information required by | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| The original and 3 copies of a completed dated application form: | The original and 3 copies of such evidence verifying the information included in the application as you can provide: | | | | | | | |
| The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | The correct fee: | | | | | | | |
| 12. Declaration I/we hereby apply for a Lawful Development Certificate 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 | | | | | | | |
| 9 | | | | | | | | |
| Date (DD/MM/YYYY): OP (OP) To F (date cannot be pre-application submission) WARNING: The amended section 194 of the 1990 Act provides that it is an offence to furnish false or misleading information or to withhold material information with intent to deceive. Section 193(7) enables the authority to revoke, at any time, a certificate they may have issued as a result of such false or misleading information. | | | | | | | | |
| 13. Applicant Contact Details | 14. Agent Contact Details | | | | | | | |
| | Telephone numbers | | | | | | | |
| Telephone numbers Extension | Extension | | | | | | | |
| Country code: National number: number: | Country code: National number: number: | | | | | | | |
| | | | | | | | | |
| Country code: Mobile number (optional): | Country code: Mobile number (optional): | | | | | | | |
| | | | | | | | | |
| Country code: Fax number (optional): | Country code: Fax number (optional): | | | | | | | |
| | | | | | | | | |
| Email address (optional): | Email address (optional): | | | | | | | |
| | | | | | | | | |
| 15. Site Visit | | | | | | | | |
| Can the site be seen from a public road, public footpath, bridleway o | 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? (<i>Please select only one</i>) | Agent Applicant Other (if different from the agent/applicant's details) | | | | | | | |
| If Other has been selected, please provide: | Tolophone number: | | | | | | | |
| Contact name: | Telephone number: | | | | | | | |
| | | | | | | | | |

Email address: