



COUNCIL of the ISLES OF SCILLY

PLANNING & DEVELOPMENT DEPARTMENT

OLD WESLEYAN CHAPEL
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ST MARY'S
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TR21 0JD

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Application for conservation area consent for demolition in a conservation area. Planning (Listed Buildings and Conservation Areas) Act 1990

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.

1. Applicant Name, Address and Contact Details

Title:	<input type="text" value="SIR"/>	First name:	<input type="text" value="W. R. A."/>	Surname:	<input type="text" value="ROSS"/>	
Company name	<input type="text" value="Duchy of Cornwall OFFICE"/>					
Street address:	<input type="text" value="10 BUCKINGHAM GATE"/>			Country Code	National Number	Extension Number
	<input type="text"/>			Telephone number:	<input type="text"/>	<input type="text"/>
	<input type="text"/>			Mobile number:	<input type="text"/>	<input type="text"/>
Town/City	<input type="text" value="LONDON"/>			Fax number:	<input type="text"/>	<input type="text"/>
County:	<input type="text"/>			Email address:	<input type="text"/>	
Country:	<input type="text" value="UK"/>					
Postcode:	<input type="text" value="SW1E 6LA"/>					
Are you an agent acting on behalf of the applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No						

2. Agent Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Chris"/>	Surname:	<input type="text" value="Wood"/>	
Company name:	<input type="text" value="Ingenium Archial"/>					
Street address:	<input type="text" value="13 Queens Terrace"/>			Country Code	National Number	Extension Number
	<input type="text"/>			Telephone number:	<input type="text" value="0044"/>	<input type="text" value="1392 253000"/>
	<input type="text"/>			Mobile number:	<input type="text"/>	<input type="text"/>
Town/City	<input type="text" value="Exeter"/>			Fax number:	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="Devon"/>			Email address:	<input type="text"/>	
Country:	<input type="text"/>					
Postcode:	<input type="text" value="EX4 4HR"/>					

3. Description of the Proposal

Please describe the proposed works:

Demolition of existing freight stores against Harbourside building and north sea wall, demolition of existing ticket office in Harbourside building.
Extension of main pier towards NE, widening of quay wall to SW to improve access to freight yard.

Has the work already started? ☐ Yes ☒ No

4. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text"/>	Suffix:	<input type="text"/>
House name:	St.Mary's Quay (The Pier)		
Street address:	Hugh Town		
	St. Mary's		
Town/City:	Isles of Scilly		
County:	<input type="text"/>		
Postcode:	TR21 0HU		
Description of location or a grid reference (must be completed if postcode is not known):			
Easting:	90202		
Northing:	10875		

5. Related Proposals

Are there any current applications, previous proposals or demolitions for the site?

☒ Yes ☐ No

If Yes, please describe and include the planning application reference number(s), if known:

- Former applications for works to Quay (Route Partnership)
- Listed Building Consent application for works to Harbourside & Freight buildings

6. 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):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

Please refer to accompanying Statement of Community Involvement

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal?

☒ Yes ☐ No

If Yes, please provide details:

- please see accompanying Statement of Community Involvement

8. Authority Employee/Member

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

Do any of these statements apply to you?

☐ Yes ☒ No

9. Explanation for Proposed Demolition Work

Why is it necessary to demolish all or part of the building(s) and/or structure(s)?

- existing freight stores are to be demolished as they are open-sided, open to elements and of poor condition. Chilled and frozen goods cannot be stored in these for the requisite periods
- ticket office demolished to provide space for improved check-in and ticketing facilities, increasing speed of check-in, thereby reducing passenger time and numbers on exposed sections of quay

10. 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)

☐ The agent ☒ The applicant ☐ Other person

11. Certificates (Certificate B)

Certificate Of Ownership - Certificate B

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I certify/The applicant certifies that I have/the applicant 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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which this application relates.

Notice recipient	Date notice served
Name: Sibley Fuel and Marine Supplies Number: <input type="text"/> Suffix: <input type="text"/> Street: Porthcressa Locality: <input type="text"/> Town: St.Mary's Postcode: TR21 0JQ	<input type="text"/>
Name: The Sail Loft / Rat Bags Number: <input type="text"/> Suffix: <input type="text"/> Street: The Thorofare Locality: <input type="text"/> Town: St.Mary's Postcode: TR21 0JQ	<input type="text"/>
Name: Southard Engineering Number: <input type="text"/> Suffix: <input type="text"/> Street: The Thorofare Locality: <input type="text"/> Town: St.Mary's Postcode: TR21 0JQ	<input type="text"/>
Name: St.Mary's Fisherman Association Number: <input type="text"/> Suffix: <input type="text"/> Street: c/o Parade Cottage Locality: The Parade Town: St.Mary's Postcode: TR21 0JQ	<input type="text"/>
Name: Isles if Scilly Steamship Company Number: <input type="text"/> Suffix: <input type="text"/> Street: Hugh Street Locality: <input type="text"/> Town: St.Mary's Postcode: TR21 0JQ	<input type="text"/>

Title: Mr First name: Chris Surname: Wood
 Person role: Agent Declaration date: 08/08/2012 ☒ Declaration made

12. 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.

☒ Date 08/08/2012