

COUNCIL of the ISLES OF SCILLY

PLANNING & DEVELOPMENT DEPARTMENT

OLD WESLEYAN CHAPEL GARRISON LANE ST MARY'S ISLES OF SCILLY **TR21 0JD**

Telephone: [01720] 424350

[01720] 424317 planning@scilly.gov.uk

Application for Planning Permission. Town and Country Planning Act 1990

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 | 2. Agent Name and Address | | | | | |
|---|---|--|--|--|--|--|
| Title: MRS First name: Persey | Title: Mn First name: Have | | | | | |
| Last name: Peu - Howard | Last name: OSBorene | | | | | |
| Company (optional): | Company (optional): | | | | | |
| Unit: House number: House suffix: | Unit: House House suffix: | | | | | |
| House name: FLAT 3 | House name: | | | | | |
| Address 1: MUNDESCEY | Address 1: Huch St | | | | | |
| Address 2: CHURCH St | Address 2: | | | | | |
| Address 3: | Address 3: | | | | | |
| Town: St. MARYS | Town: St. Maeys | | | | | |
| County: Isles of Scilly | County: SLES OF Scilly | | | | | |
| Country: UI | Country: U U | | | | | |
| Postcode: TRZI ONA | Postcode: 1821 ple | | | | | |
| 3. Description of the Proposal | | | | | | |
| A IEMPORARY Accommonation United | ^ | | | | | |
| H EMPSCARY MEDITION OF | TO ISE UNICSI | | | | | |
| WORKS CARRIED ON ON EXIS | TIME BUILDINGS. | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 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): | (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): | (date must be pre-application submission) | | | | | |
| | \$Date:: 2013-04-30 #\$ \$Revision: 5504 \$ | | | | | |

| 4. Site Address Details Please provide the full postal address of the application site. Unit: House number: House suffix: House name: LONGSTONE COUTEE Address 1: LONGSTONE Address 3: Town: St. Marys County: SLES OF SCILLY Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description: | S. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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) Details of pre-application advice received? |
|--|---|
| 6. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed to or from the public highway? Is a new or altered pedestrian access proposed to or from the public highway? Are there any new public roads to be provided within the site? Are there any new public rights of way to be provided within or adjacent to the site? Do the proposals require any diversions /extinguishments and/or creation of rights of way? If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan (s)/drawings(s) | 7. Waste Storage and Collection Do the plans incorporate areas to store and aid the collection of waste? Yes If Yes, please provide details: Have arrangements been made for the separate storage and collection of recyclable waste? Yes If Yes, please provide details: |
| 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 If Yes, please provide details of the name, relationship and role | |

| 9. Materials | | | | | | | | | |
|---|--------------------------|------------------------------|----------------|---|---------------------------------------|---------------------------------|--------------|--|--|
| | ate what mate | rials are to be used exte | rnally. Includ | e type, colour and name for e | ach material: | | | | |
| | Existing (where appli | icable) | | Proposed | | | Don' Knov | | |
| Walls | | | | TIMBER CLAS HOEIZOLAM WORD | WITH | | | | |
| Roof | | | | Test - | | | | | |
| Windows | | | | Wood | | | | | |
| Doors | | | | Wood | | | | | |
| Boundary treatments (e.g. fences, walls) | | | | | | | | | |
| Vehicle access and hard-standing | | | | As Existre | G. | | | | |
| Lighting | | | | LOW VOTORCE | | | | | |
| Others (please specify) | | | | | | | | | |
| Are you supplying addi | itional informa | ation on submitted plan | (s)/drawing(s | /design and access statemen | t? Yes | \[\bigver_{\bigver_{\bigver}}\] | No | | |
| If Yes, please state refer | ences for the | plan(s)/drawing(s)/desi | gn and access | statement: | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | | | | | | |
| 0. Vehicle Parking | | | | | | | | | |
| | | existing and proposed Total | | | D:# | | | | |
| Existing | | | | l proposed (including spaces retained) Difference in spaces | | | | | |
| Cars Light goods vehic | -les/ | | | | | | | | |
| public carrier vehi | icles | | | | | | | | |
| Motorcycles | | | | | Q. | | _ | | |
| Disability space | 15 | | | | | | _ | | |
| Cycle spaces Other (e.g. Bus | , | / | | | | | | | |
| Other (e.g. Bus | | | | | | 4 | _ | | |

| 11. Foul Sewage | 12. Assessment of Flood Risk | | | | | | |
|--|--|--|--|--|--|--|--|
| Please state how foul sewage is to be disposed of: Mains sewer Cess pit | 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 | | | | | | |
| Septic tank Other | planning authority requirements for information as necessary.) Yes Yes | | | | | | |
| Package treatment plant | If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site. | | | | | | |
| Are you proposing to connect to the existing drainage system? Yes No | Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? | | | | | | |
| If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s): | Will the proposal increase the flood risk elsewhere? | | | | | | |
| plan(s)/drawing(s). | How will surface water be disposed of? | | | | | | |
| | Sustainable drainage system Existing watercourse | | | | | | |
| | Soakaway Pond/lake | | | | | | |
| | Main sewer | | | | | | |
| 13. Biodiversity and Geological Conservation | 14. Existing Use | | | | | | |
| | Please describe the current use of the site: | | | | | | |
| To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable | FIELD - AS PAGE OF A CAFE DAM | | | | | | |
| likelihood that any important biodiversity or geological conservation features may be present or nearby and whether | FIELD - ASPARET OF A CAFE AND VISITORS CENTRE | | | | | | |
| they are likely to be affected by your proposals. | 1311013 CENTINE | | | | | | |
| Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved | Is the site currently vacant? | | | | | | |
| and enhanced within the application site, or on land adjacent to | If Yes, please describe the last use of the site: | | | | | | |
| 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 | 1/1/1 | | | | | | |
| No | When did this use end (if known)? DD/MM/YYYY | | | | | | |
| b) Designated sites, important habitats or other biodiversity | (date where known may be approximate) | | | | | | |
| features: Yes, on the development site | Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application. | | | | | | |
| Yes, on land adjacent to or near the proposed development No | Land which is known to be contaminated? Yes No | | | | | | |
| c) Features of geological conservation importance: | Land where contamination is suspected for all or part of the site? Yes Yes | | | | | | |
| Yes, on the development site | A proposed use that would | | | | | | |
| Yes, on land adjacent to or near the proposed development | be particularly vulnerable | | | | | | |
| No | to the presence of contamination? | | | | | | |
| 15. Trace and Hodges | 16. Trade Effluent | | | | | | |
| 15. Trees and Hedges Are there trees or hedges on the | Does the proposal involve the need to | | | | | | |
| proposed development site? Yes No | dispose of trade effluents or waste? | | | | | | |
| And/or: Are there trees or hedges on land adjacent to the | If Yes, please describe the nature, volume and means of disposal | | | | | | |
| proposed development site that could influence the | of trade effluents or waste | | | | | | |
| development or might be important as part | of trade effluents or waste | | | | | | |
| development or might be important as part of the local landscape character? If Yes to either or both of the above, you may need to provide a full | of trade effluents or waste | | | | | | |
| development or might be important as part of the local landscape character? If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be | of trade effluents or waste | | | | | | |
| development or might be important as part of the local landscape character? If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a | of trade effluents or waste | | | | | | |

| 17. Residential U Does your proposal in If Yes, please comple | nclude t | he a | ain, lo | ss or c | hang | e of use of | reside elow: | ntial units? Yes | | No | | | | | |
|---|-------------------------------------|-------|-----------|---------------|---------|-----------------|------------------|-----------------------|---------------|--------|----------|--------------|----------|-----------------|-------|
| Proposed Housing | | | | | | | Existing Housing | | | | | | | | |
| Market | Not | | | _ | | | Total | Market | Not | | _ | ber o | _ | ooms | Tota |
| Housing | known | 1 | 2 | 3 | 4+ | Unknow | | Housing | known | 1 | 2 | 3 | 4+ | Unknown | 1 |
| Houses | | | - | - | | | g. | Houses | $\perp \Box$ | - | - | ļ | - | | O |
| Flats and maisonette | s 🗌 | - | +- | - | - | | b | Flats and maisonettes | s 🗆 | - | - | _ | | | b |
| Live-work units | | 1 | +- | - | - | | 1 | Live-work units | $\perp \perp$ | _ | - | _ | | | C |
| Cluster flats | | | - | - | - | | d | Cluster flats | | _ | - | | - | | d |
| Sheltered housing | | | | _ | | | 10 | Sheltered housing | | | - | _ | | | е |
| Bedsit/studios | | | | - | - | | 1 | Bedsit/studios | | _ | | | | | f |
| Unknown type | | | | | _ | | g | Unknown type | | | | | | | 9 |
| | Т | otals | s (a + i |) + c + | - d + e | +f+g)= | A | | Т | otals | (a + t |) + c + | d + e | +f+g)= | Е |
| | T | _ | | | | | Tatal | | | _ | | | | | T= . |
| Social Rented | Not known | 1 | Num 2 | <u>ber of</u> | 4+ | ooms Unknowr | Total | Social Rented | Not known | 1 | Num 2 | ber of | - | ooms Unknown | Tota |
| Houses | | | | | | | a | Houses | | | <u> </u> | | | CHILIOWII | a |
| Flats and maisonettes | | | | | | | Ь | Flats and maisonettes | | | | | | | ь |
| Live-work units | | | | | | | C | Live-work units | | | | | | | C C |
| Cluster flats | | | | | | | d | Cluster flats | | | | | | | d |
| Sheltered housing | | | | | | | 8 | Sheltered housing | | | | | | | 2 |
| Bedsit/studios | | | | | | T I | | Bedsit/studios | | | 1 | | | | f |
| Unknown type | | | | | | | a | Unknown type | | | | | | | g |
| Totals $(a+b+c+d+e+f+g) = B$ | | | | | | | В | - initiality pe | Т. | otals | (a+b) | + + + | d + e | + f + g) = | E |
| , | | | | | | | | • | | (4 1 0 | | 4 1 0 | 11197 | | |
| Intermediate | Not known | 1 | Numl 2 | per of | | ooms Unknown | Total | Intermediate | Not known | 1 | Numb | oer of | | ooms Unknown | Tota |
| Houses | | • | _ | | | OTIKITOWIT | a | Houses | | | | 3 | 41 | OTKHOWIT | 0 |
| Flats and maisonettes | | | | | | | 12 | Flats and maisonettes | | | | | | | b |
| Live-work units | | | | | | | r | Live-work units | | | | | | | 6 |
| Cluster flats | | | | | | | 71 | Cluster flats | | | | | | | d |
| Sheltered housing | | | | | | | p | Sheltered housing | | | | | | | 6 |
| Bedsit/studios | | | | | | | f | Bedsit/studios | | | | | | | £ |
| Unknown type | | | | | | | a | Unknown type | | | | | | | - |
| 7,1 | | tals | (a+b) | + (+ | d+e | +f+g)= | C | ommown type | T | ntals | (a + b) | + C + | d ± o | + f + g) = | g |
| | | - | (6 6 | | | . , , , , | | | | otais | (u i b | 101 | ure | 17+9/- | , CJ |
| Key worker | Not | 1 | | er of | | | Total | Key worker | Not | | Numb | | | | Total |
| Houses | known | _1_ | 2 | 3 | 4+ | Unknown | | | known | 1 | 2 | 3 | 4+ | Unknown | |
| Flats and maisonettes | | | | | | | Cl . | Houses | | | | | | | U. |
| Live-work units | | - | | | | | D . | Flats and maisonettes | | | | | | | b |
| | | | | | - | | C . | Live-work units | | | | | | | С |
| Cluster flats | | | | | | | đ | Cluster flats | | | d | | | | |
| Sheltered housing | | | | | - | | .6 | Sheltered housing | | | 0 | | | | |
| Bedsit/studios | | | | | | | Ē | Bedsit/studios | | | | | | | f |
| Unknown type | | | , . | | | | g | Unknown type | | | | | | | g |
| | Totals $(a+b+c+d+e+f+g) = 1$ | | | | | | | | To | otals | (a + b | + <i>c</i> + | d + e · | + f + g) = | 0 |
| Total proposed residential units $(A+B+C+D) = $ | | | | | | | Total existing | residen | tial u | ınits | (E + | F + G | + H) = 6 | 5 | |

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

| | Types of Developm | | | | | | 7 N- | | |
|--|--|-------------------|---|--|---------------------------------------|--|---|--|--|
| Does your proposal involve the loss, gain or change of use of non-residential floorspace? If you have answered Yes to the question above please add details in the following table: | | | | | | | | | |
| | se class/type of use | Not applicable | Existing gross internal floorspace (square metres) | Gross interna to be lost by use or de (square r | I floorspace change of molition | Total gross internal floorspace proposed (including change of use)(square metres) | Net additional gross internal floorspace following development (square metres) | | |
| A1 | Shops | | | / | | | | | |
| | Net tradable area: | | | | | | | | |
| A2 | Financial and professional services | | | | | | | | |
| А3 | Restaurants and cafes | | | | | | | | |
| A4 | Drinking establishments | | | | | | | | |
| A5 | Hot food takeaways | | | | | | | | |
| B1 (a) | Office (other than A2) | | | | | | | | |
| B1 (b) | Research and development | | | | | | | | |
| B1 (c) | Light industrial | | | | | / | | | |
| B2 | General industrial | | | | | | | | |
| B8 | Storage or distribution | | | | | | | | |
| C1 | Hotels and halls of residence | | | | | | | | |
| C2 | | | | | | | | | |
| D1 | Non-residential institutions | | | / | | | | | |
| D2 | Assembly and leisure | | | | | | | | |
| OTHER | | | | | | | | | |
| Please Specify | | | | | | | | | |
| эрсспу | Total | | | | | | | | |
| In add | dition, for hotels, resident | ial ins | titutions and hos | tels, please ad | ditionally ind | icate the loss or gain of r | ooms | | |
| Use | Type of use Not | Existi | ng rooms to be | ost by change | Total room: | s proposed (including anges of use) | Net additional rooms | | |
| class C1 | Hotels applicable | | or use or demo | DIITION | Ch | anges of use) | | | |
| C2 | Residential | | | | | | | | |
| OTHER | Institutions | | | | | | | | |
| Please | | | | | | | | | |
| Specify | | | | | | | | | |
| | ployment | | | | | | | | |
| Please co | emplete the following info | - | | | | Tota | Il full-time | | |
| Foil | etia a amarla (a a | | Full-time | yart- | time | | uivalent | | |
| | Existing employees Proposed employees | | | | | | | | |
| | | | | | | | | | |
| | irs of Opening | | Decorate 1 | | | | | | |
| Please | e state the hours of openi | - | | / | | Sunday and | Not be seen | | |
| | Use Mo | nday | to Friday | Saturday | y | Bank Hólidays | Not known | | |
| | | | -/ | | | | | | |
| | | | | | | | | | |
| 24 6'' | | | | | | | | | |
| 21. Site | Area | c (ba) | | | | | | | |

| 22. Industrial or Commercial Proc | esses | and Machin | ery | | | | |
|---|--|--|---|--------------------------------|---------------------------------|--|--|
| Please describe the activities and processes be carried out on the site and the end prod plant, ventilation or air conditioning. Please type of machinery which may be installed o | ucts in | cluding de the | | / | | | |
| Is the proposal a waste management devel | opme | nt? Yes | □ No | | | | |
| If the answer is Yes, please complete the fo | | | _ / | | | | |
| | Not applicable | The total cap including eng allowance fo tonnes if so | pacity of the void in ineering surcharge r cover or restorat lid waste or litres i | e and making ion material (| throughput in tonnes | | |
| Inert landfill | | | | | | | |
| Non-hazardous landfill | | | | | | | |
| Hazardous landfill | | | | | | | |
| Energy from waste incineration | | | | | | | |
| Other incineration | | , | | | | | |
| Landfill gas generation plant | | | | | | | |
| Pyrolysis/gasification | | | | | | | |
| Metal recycling site | | | | | | | |
| Transfer stations | | | | | | | |
| Material recovery/recycling facilities (MRFs) | | | | | | | |
| Household civic amenity sites | | | | | | | |
| Open windrow composting | | | | | | | |
| In-vessel composting | | | | | | | |
| Anaerobic digestion | | | | | i) | | |
| Any combined mechanical, biological and/ or thermal treatment (MBT) | 9 | | | | | | |
| Sewage treatment works | 口 | | | | | | |
| Other treatment | | | | | | | |
| Recycling facilities construction, demolition and excavation waste | | | | | | | |
| Storage of waste | | | | | | | |
| Other waste management | | | | | | | |
| Other developments | | | | | | | |
| Please provide the maximum annual operat | ional t | hroughput of th | ne following waste | streams: | | | |
| Municipal | | | | | | | |
| Construction, demolition and e | | tion | | | | | |
| Commercial and indust | rial | | | | | | |
| Hazardous | | | | | | | |
| If this is a landfill application you will need t planning authority should make clear what | o prov inform | nation it requires | rmation before you s on its website. | ur application | n can be determined. Your waste | | |
| 23. Hazardous Substances | | | | | | | |
| Does the proposal involve the use or storage the following materials in the quantities state | | | 4400 | Not app | plicable | | |
| If Yes, please provide the amount of each su | bstand | e that is involve | ed: | | | | |
| Acrylonitrile (tonnes) | Et | hylene oxide (to | onnes) |] | Phosgene (tonnes) | | |
| Ammonia (tonnes) | Hydro | ogen cyanide (to | onnes) |] | Sulphur dioxide (tonnes) | | |
| Bromine (tonnes) Liquid oxygen (tonnes) Flour (tonnes) | | | | | | | |
| Chlorine (tonnes) | Chlorine (tonnes) Liquid petroleum gas (tonnes) Refined white sugar (tonnes) | | | | | | |
| Other: | | | Other: | | | | |
| Amount (tonnes): | | | Amount (ton | nes): | | | |

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