

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

OLD WESLEYAN CHAPEL
P - 14 - 032

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PLANNING & DEVELOPMENT DEPARTMENT

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: MR First name: MARK	Title: First name:
Last name: WRIGHT	Last name:
Company (optional): WRIGHT CONSTRUCTION LTD	Company (optional):
Unit: House number: 5 House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: BARNES ACRE	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: ST MARYS ISLES OF SCILLY	Town:
County: CORNWALL	County:
Country: ENGLAND	Country:
Postcode: TR21 OAB	Postcode:
3. Description of the Proposal	
Please describe the proposed development, including any change of u	
TO REINSTATE A TIMBER GATE AT THE MAIN A	ROAD ENTRANCE TO SCILLONIA BUILDING SUPPLIES,
	*
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	5. Pre-application Advice						
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local						
Unit: House House suffix:	authority about this application?						
House name: Scillonia Building Supplies	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this						
Address 1: PORTHMELLON INDUSTRIAL ESTATE	application more efficiently). Please tick if the full contact details are not						
Address 2: PORTHMELLON	known, and then complete as much as possible:						
Address 3: ST MARYS	Officer name:						
Town: I SLES OF SCILLY	CRAIG DRYDREN						
County: COENDALL	Reference:						
Postcode (optional): TR21 OJY							
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)						
Easting: Northing:	Details of pre-application advice received?						
Description:	POSITIVE ABOUT THIS APPLICATION						
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection						
Is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste?						
Is a new or altered pedestrian	If Yes, please provide details:						
access proposed to or from the public highway? Yes No							
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	Have arrangements been made for the separate storage and						
creation of rights of way?	collection of recyclable waste?						
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)	If Yes, please provide details:						
(s)/urawings(s)							
8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No						
(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 If applicable, please st	ate what n	naterials are to be used ext	ernally. Includ	e type, colour and name for	each material:		
	Existing (where a	applicable)		Proposed		Not applicable	Don't
Walls							
Roof						d	
Windows							
Doors				A 8 1 A		d	
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing							
Lighting							
Others (please specify)	HEH (Î ATE		TIMBER			
		ormation on submitted plant the plan(s)/drawing(s)/des		/design and access statemo	ent? Yes		No
10. Vehicle Parking	9						
	A	the existing and proposed			T		
Type of Vehicle		Total Existing	Total	proposed (including paces retained)	Difference in spaces		
Cars					0	20 20 mm at 21 mm at 21	
Light goods vehicles/ public carrier vehicles					0		
Motorcycles				***************************************	0		
Disability space	es .				0		
Cycle spaces					0		
Other (e.g. Bus)					0		
Other (e.g. Bus))				0		

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.)
Soprie tank	Yes No
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	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 likelihood that any important biodiversity or geological	BUILDING MERCHANTS
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant?
likelihood of the following being affected adversely or conserved 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	position and the contraction of
TZ No.	When did this use end (if known)?
No Designated sites important habitats or other biodiversity	When did this use end (if known)? DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate) Does the proposal involve any of the following?
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Does your proposal If Yes, please comple						ne tables b	elow:	ential units? Yes		No					
	Proposed Housing Market Not Number of Bedrooms Total									ting	Hou	sing	I		
Market Housing	Not known	1	Nun 2	ber o	of Bed		Tota	Market Housing	Not		7			rooms	To
Houses		+	-	1	47	UTIKITOW	1	Houses	knowr	1	2	3	4+	Unknow	'n
Flats and maisonette	s 🗆			+	+		+	Flats and maisonette		+-	+-	-	+	-	-
Live-work units			+-	+	+			Live-work units		-	-	-	-		+-
Cluster flats	10		+	+	+		+	Cluster flats	+		+-	-	+		-
Sheltered housing			T	1	+	-	+	Sheltered housing	+	-	+	-	+-	-	+
Bedsit/studios			\vdash	\vdash	+	1	1	Bedsit/studios	+	-	+	+	+-	-	-
Unknown type				1	+		-	Unknown type	+	-	-	-	-	+	-
	T	otals	(a +	b + c ·	+ d +	e + f + g = 0	1	Griknowii type		otak	1/0 .	b . a		- 6 -1	-
			10			<i></i>				otais	(a +	D + C	+ a +	e + f + g) =	
Social Rented	Not		Num	ber o	f Bed	rooms	Total		Not		Num	horo	f Rod	rooms	Tot
	known	1	2	3	4+	Unknow		Social Rented	known	1	2	3	4+		
Houses								Houses							
Flats and maisonettes								Flats and maisonettes	s \square						
Live-work units								Live-work units							
Cluster flats								Cluster flats							1
Sheltered housing								Sheltered housing							1
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	To	tals	(a + L) + C +	d + ε	+ f + g) =			To	otals	(a + l) + C -	+ d + e	e + f + g) =	
	NI-A		Munal		D. d.	-	T-4-1								
Intermediate	Not known	1	2	3	Bedro 4+	Unknowr	Total	Intermediate	Not known	1	Num 2	ber o	Bedr 4+	ooms Unknown	Tota
Houses								Houses	П			-	47	UTKHOWI	1
Flats and maisonettes								Flats and maisonettes				-			-
Live-work units				337				Live-work units							-
Cluster flats								Cluster flats					-		
Sheltered housing								Sheltered housing					-		
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type		_					
	To	tals (′a + b	+ C +	d + e	+ f + g) =				tals	(a + b	+ C +	d+e	+ f + g) =	
														9/	
Key worker	Not _	1 I	lumb 2	er of		ooms Unknown	Total	Key worker	Not					ooms	Tota
Houses		-		3	4+	UTIKHOWII		Houses	known	1	2	3	4+	Unknown	
Flats and maisonettes		\dashv	+					Flats and maisonettes	\Box						
Live-work units		\dashv	\dashv	-			$-\parallel$	Live-work units		-					
Cluster flats	一十	-	-	\neg				Cluster flats			_				
Sheltered housing	\exists	+	+	\neg			$-\parallel$	Sheltered housing		-					
Bedsit/studios	\exists	+	+	-	-			Bedsit/studios							
Unknown type		+	_	\dashv				Unknown type		-				-	
<i>J</i> 1	Tot	als (a	a + b -	+ C + (d + e -	+ f + g) =		Officiowit type		tals ((2 , h		d , o	+ f + g) =	
									10	tais (a + D	+ (+	<i>u + e</i>	+1+g) =	
Total proposed re	sidentia	l uni	ts	(A + E	3 + C +	- D) =		Total existing r	esident	ial u	nits	(E +	F + G	+ H) =	
TOTAL NET GAIN or L	OSS of F	RESIE	DENT	IAL U	NITS	(Propose	d Hous	ing Grand Total - Exist	ina Hou	ısina	Gran	nd To	tal):		

18. All Types of Development: Non-residential Floorspace									
	•			in or change of us				No	
If you	u have answe	ered Yes to th	Not applicable	estion above plea				T	
Us	Use class/type of use			Existing gross internal floorspace (square metres)	Gross internal to be lost by use or den (square m	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	Sh	ops							
		able area:							
A2	profession	cial and nal services							
A3		ts and cafes	Ш						
A4	Drinking es	tablishments							
A5	Hot food	takeaways							
B1 (a)		er than A2)							
B1 (b)		rch and opment							
B1 (c)	Light ir	ndustrial							
B2	General	industrial							
B8		distribution							
C1		nd halls of lence							
C2		institutions						•	
D1		sidential utions							
D2	Assembly and leisure								
OTHER	R								
Please Specify									
	To	otal							
In add	dition, for ho	tels, resident	ial ins	titutions and hos	tels, please add	ditionally inc	dicate the loss or gain of	rooms	
Use	Type of use	Not applicable	Existi	ng rooms to be lo of use or demo	ost by change Total room olition ch		ns proposed (including nanges of use)	Net additional rooms	
C1	Hotels								
C2	Residential Institutions								
OTHER									
Please Specify									
	ployment								
10			ormat	ion regarding em	plovees:				
1.1000000	proto the		J	Full-time	1	time		al full-time	
Exi	sting employ	vees		1			ec	quivalent 1	
	oosed emplo			<u> </u>				l	
20 Hou	ırs of Ope	ning							
			ina fo	r each non-reside	ential use prope	osed:			
. 1003	Use			to Friday	Saturday		Sunday and Bank Holidays	Not known	
BUILL	DERS MERCHA		8 - 5		8-12			7	
21. Site	Area								
Please sta	ate the site a	rea in hectar	es (ha)	0.8					

22. Industrial or Commercial Proce	sses	s and Mac	hinery					
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed or	which octs in inclu n site	h would ncluding de the :	STORAGE OF BUILDING MATERIALS FOR SALE.					
Is the proposal a waste management develo	pme	nt? Ye	es Avo				_	
If the answer is Yes, please complete the foll	owin	g table:						
	Not applicable	The tota including allowand tonnes	otal capacity of the void in cubic metres, ng engineering surcharge and making n unce for cover or restoration material (or es if solid waste or litres if liquid waste)			Maximum annual operational throughput in tonnes (or litres if liquid waste)		
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								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment	司						_	
Recycling facilities construction, demolition and excavation waste	П						_	
Storage of waste	$\overline{\Box}$							
Other waste management	ᆔ							
Other developments	ᆔ	***************************************					_	
Please provide the maximum annual operation	onal t	hroughput o	of the following wast	e streams:				
Municipal							_	
Construction, demolition and ex	cava	tion						
Commercial and industri	al							
Hazardous								
If this is a landfill application you will need to planning authority should make clear what in	prov	ide further in ation it requ	nformation before your ires on its website.	our applicatio	n can be	e determined. Your waste		
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities state	of an d bel	y of ow?	s No	Not ap	plicable			
If Yes, please provide the amount of each sub	stand	e that is invo	olved:					
Acrylonitrile (tonnes)		hylene oxide			ļ	Phosgene (tonnes)		
Ammonia (tonnes)	Hydro	gen cyanide	e (tonnes)		Sulphi	ur dioxide (tonnes)		
Bromine (tonnes)	quid oxyger	(tonnes)			Flour (tonnes)			
Chlorine (tonnes) Liqu	ıid pe	etroleum gas	s (tonnes)	Re	fined wl	hite sugar (tonnes)		
Other:			Other:					
Amount (tonnes):			Amount (tor	nnes):			7	