

COUNCIL of the

PLANNING & DEVELOPME

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

Telephone: [01720] 424350

Fax: Email: [01720] 424317

planning@scilly.gov.uk

Application for listed building consent for afterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas) Act 1990

PLANNING DEPARTMENT

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:	First name:	Title: First name:				
Last name:		Last name:				
Company (optional):	ST AUSTELL BREWERY COLTD	Company (optional):				
Unit:	House number: 63 House suffix:	Unit: House number: House suffix:				
House name:		House name:				
Address 1:	TREVARTHIAN ROAD	Address 1:				
Address 2:		Address 2:				
Address 3:		Address 3:				
Town:	ST AUSTELL	Town:				
County:	CORNWALL	County:				
Country:		Country.				
Postcode:	PL25 4B4	Postcode:				
3. Description of Proposed Work						
Please describe the proposals to alter, extend or demolish the listed building(s):						

WIDENING OF EXISTING SINGLE DOOR INTERNAL ENTRANCE TO KITCHEN, TO PROVIDE DOUBLE SHING DOOR, TO INCREASE OPERATIONAL SAFETY. WORKS INCLUDE REMOVAL OF APPROXIMATRY 3 FEX 6 FE OF ORIGINAL STONEWORK, AND INSTALLATION OF STEEL LINTEL.

3. Description of Proposed Work (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
started without consent?	Unit: House number: House suffix:
If Yes, please state when the work was started (DD/MM/YYYY):	name: THE ATCANTIC
work was started (DD/MM/TTTT):	Address 1: HUGH STREET
	Address 2: ST MARY'S
(date must be pre-application submission)	Address 3: Town: ISLES OF SCILLY
Has the work been completed without consent?	Postcode POST OFFI
	(optional): TR21 OHY Description of location or a grid reference.
If Yes, please state the date when the work was completed (DD/MM/YYYY):	(must be completed if postcode is not known):
work was completed (DD/MIM/YYYY):	Easting: Northing:
	Description:
(date must be pre-application submission)	
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site? Yes No	Has assistance or prior advice been sought from the local authority about this application?
If Yes please describe and include the planning application	If Yes, please complete the following information about the advice
reference number(s), if known:	you were given. (This will help the authority to deal with this
Description Reference number	application more efficiently). Please tick if the full contact details are not
	known, and then complete as much as possible:
	Officer name:
	LISA WALTON Reference:
	neierence.
	Date (DD/MM/YYYY):
	(must be pre-application submission)
	Details of pre-application advice received? CONTACTED LISA REGARDING SCRARATE
	PROPOSAL TO REMOVE PARTITIONS WALL.
	ADVISE RECIEWED FROM LISATHAT PARTITION WALL WOULD NOT REDDIRE CONSENT,
	HOWEVER ANY WORK TO ORISINAL STRUCTURE WOULD REQUIRE CONSENT
7. Neighbour and Community Consultation	8. Authority Employee / Member With respect to the Authority, I am: Do any of these
Have you consulted your neighbours or the local community about the proposal? Yes No	(a) a member of staff statements apply to you?
If Yes, please provide details:	(b) an elected member (c) related to a member of staff
If Yes, please provide details:	(d) related to an elected member
	If Yes, please provide details of the name, relationship and role
	\$Date:: 2013-02-27 #\$ \$Revision: 4883 \$

	Existing (where applicable)	Proposed	Not applicable	Don' Knov
External walls				
Roof covering				
Chimney				
Windows			V	
External doors				
Ceilings				
Internal walls	STONE WALLS	STONE WALLS		
Floors				
Internal doors	22/1 SINGLE FIRE DOOR WITH SELF CLOSER	DOUBLE FIRE DOOR WITH USION PANELS AND SELF CLOSERS		
Rainwater goods				
Boundary treatments (e.g. fences, walls)			1	
Vehicle access and hard standing				
Lighting				
Others (add description)				
	itional information on submitted drawings or plants)/drawing(s) references:	ns? Yes No		
	5; KTO2/2015; KTO3/	2015; KT04/2015		

10. Demolition	11. Listed Building Alterations		
Does the proposal include the partial or demolition of a listed building? Yes No	Do the proposed works include alterations to a listed building?		
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include: (you must answer each of the questions)		
a) Total demolition of the listed building: Yes No			
b) Demolition of a building within the curtilage of the listed building: Yes No	a) Works to the interior of the building? Yes No		
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No		
If the answer to c) is Yes:	c) Works to any structure or object fixed		
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage) internally or externally? Yes No		
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No		
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of		
Please provide a brief description of the building or part of the building you are proposing to demolish:	structural support and state references for the plan(s)/drawing(s):		
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?			
12. Listed Building Grading	13. Immunity From Listing		
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building? Yes No Don't know		
Grade Ecclesiastical Grade	If Yes, please provide the result of the application:		
Grade II* Ecclesiastical Grade II*			
Grade II Ecclesiastical Grade II			
Don't know			