

ISLES OF SCILLY

ST MARY'S ISLES OF SCILLY TR21 0JD

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PLANNING & DEVELOPMENT DEPARTMENT

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

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

ablication of applications on planning authority websites

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

ease complete using block capitals and black ink.

s important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Applicant Name and Address	2. Agent Name and Address
tle: MR First name: SIMON	Title: First name:
ast name: GETLIFFE	Last name:
ompany optional):	Company (optional):
nit: House House suffix:	Unit: House House suffix:
ouse POND HOUSE	House name:
ddress 1: MAN ST	Address 1:
ddress 2: TUR LANGTON	Address 2:
ddress 3:	Address 3:
own: LEICESTER	Town:
ounty: LEICESTERSHIRE	County:
ountry: UK	Country:
ostcode: LE8 OFT	Postcode:
. Description of Proposed Work	
lease describe the proposals to alter, extend or demolish the listed	building(s):
REMOVAL OF PART OF INTO	RNAL WALL BETWEEN
RECEPTION ROOM AND K	UTCHEN AT REAR
REPLACE EXISTING INA	PROPRIATE STYLED WINDOWS
(2) WITH WOODEN PER	
REAR OF PROPERTY	1 6 FEB 2015
	1

	riease provide the full postal address of the application site.
as the work already arted without consent? Yes No	Unit: House House suffix:
	House name: RAVEEN
Yes, please state when the ork was started (DD/MM/YYYY):	Address 1: CHURCH ST
	Address 2: WAH TOWN
	Address 3: ST MARY'S
ate must be pre-application submission)	Town: 1805 OF SULLY
as the work been	County:
mpleted without consent? Yes No	Postcode (optional): TRD / OJT.
Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
ork was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
ate must be pre-application submission)	
Related Proposals re there any current applications, previous oposals or demolitions for the site? Yes No	6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No
f Yes please describe and include the planning application	
reference number(s), if known:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Description number	application more efficiently). Please tick if the full contact details are not
000000000000000000000000000000000000000	known, and then complete as much as possible:
REPLACEMENT ROOF LBC	Officer name:
	LISA WALTON
	Reference:
	Date (DD/MM/YYYY):
	(must be pre-application submission)
	Details of pre-application advice received? TO SUB MIT APPLICATION.
	10 SOBTON MAPCICATION,
Neighbour and Community Consultation	8. Authority Employee / Member With respect to the Authority, I am: Do any of these
e local community about the proposal? Yes No	(a) a member of staff statements apply to you?
Yes, please provide details:	(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
	and total

	Existing (where applicable)	Proposed	Not applicable	Don' Knov
:xternal walls			70	
loof covering				
Lhimney				
Vindows	1960'S TOP OPENING	WHOTE PANTED WOODEN SASH		
:xternal doors				
Leilings				
nternal walls	RASTERLAS MASONRY	PLASTERED MASONRY WALL		
·loors				
nternal doors				
lainwater goods				
Soundary treatments e.g. fences, walls)				
/ehicle access and nard standing				
ighting				
Others add description)				
Yes, please state plan	itional information on submitted drawings or pla (s)/drawing(s) references: HHS AND GROWND FS (N SPONLI)			

Yes	No	to a listed building?	Nc		
involve?		If Yes, do the proposed works include:			
Yes	₩ No	(you must answer each of the questions)			
Yes	No	a) Works to the interior of the building?	Nc		
Yes	√ No	b) Works to the exterior of the building?	Nc		
		c) Works to any structure or object fixed			
			Nc		
		d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?	Nc		
)		extent and character of the items to be removed, and the	۱,		
ding or p	oart of the	structural support and state references for the plan(s)/drawing			
		IMG 2150 PRABSAZ VIEWZO Ran KITZHIN			
		IMG 2146 PROPOSAL VIEWAD FROM RECEPTION			
/hy is it necessary to demolish or extend (as applicable) all or part f the building(s) and or structure(s)?		IMG 2172 Y 2173 WINDOWS TO BE REPLACED			
		IMA 2182 STYLE OF REPLACEMENT	ī		
		STEPLAN LOCATION RAN			
		DESIGN Y ACCESS STATEMENT.			
		13. Immunity From Listing			
2. Listed Building Grading ease state the grading (if known) of the building in the list of uildings of Special Architectural or Historic interest? (Note: only ne box must be ticked)			ct		
astical Gra	ade I				
		If Yes, please provide the result of the application:			
tical Grad	le II*				
stical Gra	de II				
Don't k	now 🗌				
	involve? Yes Yes Yes Yes opplicable rest? (No	involve? Yes No Yes No Yes No One of the opticable all or part	to a listed building? If Yes, do the proposed works include: (you must answer each of the questions) a) Works to the interior of the building? Yes		