

COUNCIL of the

GARRISON LANE T MARY'S ISLES OF SCILLY R21 0JD

OLD WESLEYAN CHAPEL

-16-049

0 6 JUN 2016 PLANNING & DEVELOPMENT DEPARTMENT

ax:

2. Agent Name and Address

First name:

elephone: [01720] 424350 [01720] 424317

mail: planning@scilly.gov.uk

Householder Application for Planning Permission for works or extension to a dwelling. 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.

First name:

1. Applicant Name and Address

Title:

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

Last name: GOEGODY	Last name: OSCORNE
Company (optional):	Company (optional):
Unit: House House suffix:	Unit: House House suffix:
House MOONERAMERS	House name: Jus Limia
Address 1: CTARRISON LANE	Address 1: CAPM THOMAS
Address 2:	Address 2:
Address 3:	Address 3:
Town: St. MARIS	Town: St. Marys
County: SLES OF SCILLY	County: SLES OF SCILLY
Country: UK	Country: UU
Postcode: 1221 05F	Postcode: TR21 OPT.
3. Description of Proposed Works	
Please describe the proposed works:	
ADDITION OF TWO DORMER W	INDOUS
,	
*>	
	\$Date:: 2010-09-10 #\$ \$Revision: 2998 \$

3. Description of Proposed Works (continued)	
Has the work already started?	
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed?	
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or altered vehicle access proposed to or from the public highway? Yes
Unit: House number: 384 House suffix:	proposed to or from the public highway? Is a new or altered pedestrian access
House MOON PANOLS	proposed to or from the public highway? Yes Yo
Address 1: GARRISON LANE	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2:	rights of way? Yes VNO If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
Town: St. Maris	
County: ISLES OF SCILLY	
Postcode 100	
(optional): 122103F	
6. 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 possible: Officer name: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings: Will any trees or hedges need to be removed or pruned in order to carry out your proposal? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.
THE ROOF DETAIL	
8. Parking Will the proposed works affect	9. Authority Employee / Member With respect to the Authority, I am:
existing car parking arrangements? Yes No	(a) a member of staff Do any of these
If Yes, please describe:	(b) an elected member (c) related to a member of staff (d) related to an elected member (d) related to an elected member
	If Yes, please provide details of the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	BLOCK	TIMBER FRAME		
Roof	UDOD SHINGLE	WOOD SHINGLE		
Windows	UPUC	UPVC		
Doors				
Boundary treatments (e.g. fences, walls)			·	
Vehicle access and hard-standing			T.	
Lighting	2400	2400		
Others (please specify)				
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes Yes Yes Yes				

11. Ownership Certificates					
One Certificate A, B, C, or D, must be Town and Country Planning (D	CERTIFICAT evelopment Man	E OF O	WNERSHIP - CE	RTIFICATE A	o undovikula 13
owner (owner is a person with a freehold which the application relates.	he day 21 days be	tore the ld intere	date of this and	nlication nobody except myself/	the applicant was the
Signed - Applicant:		Or sign			Date (DD/MM/YYYY):
					06/04/2016
CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 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.					holand who on the day
Name of Owner			Address	S	Date Notice Served

Signed - Applicant:		Or sign	ed - Agent:		Date (DD/MM/YYYY):
Town and Country Planning (De I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so. The steps taken were:	issued for this ap	plication	n es and addresse	es of the other owners (owner is a uilding, or of a part of it , but I ha	porcon with a freshold
Name of Owner					
Name of Owner			Address		Date Notice Served
		-			

				The state of the s	
Notice of the application has been public (circulating in the area where the land is	shed in the follow situated):	ing new	spaper	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:		Or sign	ed - Agent:		Date (DD/MM/YYYY):
		J. J.g.110	- rigette.		Date (DD/MM/YYYY):

11 Ourseyship Cartificator (cartinus 1)				
11. Ownership Certificates (continued)				
Certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been ta date of this application, was the o	certificate of ownership - certificate D relopment Management Procedure) (England) Order 2010 this application ken to find out the names and addresses of everyone else who with a present with a freehold interest or leasehold interest or lease	o, on the day 21 days before the		
The steps taken were:	application and application an	ne to do 30.		
Notice of the application has been publish (circulating in the area where the land is s		date (which must not be earlier ore the date of the application):		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):		
Town and Country Planning (Deve	12. Agricultural Land Declaration AGRICULTURAL LAND DECLARATION Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 Agricultural Land Declaration - You Must Complete Either A or B			
(A) None of the land to which the applicat				
Signed - Applicant:	ion relates is, or is I holding.	Doto (DD /844 00000		
		Date (DD/MM/YYYY):		
		06/06/2016		
(B) I have/ The applicant has given the requisite notice to every myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:				
Name of Tenant	Address	Date Notice Served		
2				
Signed - Applicant:	Or signed - Agent:	Date /DD // 11100000		
- Street Applicants	Or signed - Agent:	Date (DD/MM/YYYY):		
13. Planning Application Require	ments - Checklist			
Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all nformation required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form:	The original and 3 copies of a The correct design and access statement if	fee:		
The original and 3 copies of a plan which	proposed works fall within a			
identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	World Heritage Site, or relate to a Completed.	l and 3 copies of the dated Ownership A, B, C or D - as applicable):		
The original and 3 copies of other plans				
and drawings or information necessary to describe the subject of the application:	completed,	l and 3 copies of the dated Article 12 Certificate al Holdings):		

14. Declaration	
I/we hereby apply for planning permission/consent as information.	orm and the accompanying plans/drawings and additional
Signed - Applicant: Or s	Date (DD/MM/YYYY):
	/ / / / / / / / / / / / / / / / / / /
	0662016 (date callifor be pre-application)
15. Applicant Contact Details	16. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:	
	01720 423377
Country code: wobile number (optional):	Country code: Mobile number (optional):
Country code 5	
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
ernan address (optional).	1/
	paul (a sciel scilly com
17. 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)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:	agent/applicant's details)
Contact name:	Telephone number:
MR. JOHNE CIREGORY	
Email address:	