

If you would rather make this application online, you can do so on our website:

https://www.planningporfalee.uk/apply HE

PLANNING DEPARTMENT

19/07

2 9 OCT 2019

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

Town and Country Planning Act 1990

## **Privacy Notice**

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)'.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their obligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

## **Local Planning Authority details:**



COUNCIL OF THE ISLES OF SCILLY
Planning Department
Town Hall, The Parade, St Mary's, Isles of Scilly, TR21 OLW
© 01720 424350
© planning@scilly.gov.uk

2. Agent Name and Address

## **Publication on Local Planning Authority websites**

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the authority directly.

If printed, please complete using block capitals and black ink.

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

| 1. Applic              | 1. Applicant Name and Address |  |  |
|------------------------|-------------------------------|--|--|
| Title:                 | MR. First name: KEVIN         |  |  |
| Last name:             | SHERRIS.                      |  |  |
| Company<br>(optional): |                               |  |  |
| Unit:                  | House number: House suffix:   |  |  |
| House<br>name:         | PENHALLOW                     |  |  |
| Address 1:             | PILOTS RETREAT.               |  |  |
| Address 2:             |                               |  |  |
| Address 3:             |                               |  |  |
| Town:                  | ST MARYS.                     |  |  |
| County:                | ISLES OF SCILLY               |  |  |
| Country:               | UK                            |  |  |
| Postcode:              | TRZI OPB.                     |  |  |

| Title:                 | First name:         |
|------------------------|---------------------|
| Last name:             |                     |
| Company<br>(optional): |                     |
| Unit:                  | House House suffix: |
| House<br>name:         |                     |
| Address 1:             |                     |
| Address 2:             |                     |
| Address 3:             |                     |
| Town:                  |                     |
| County:                |                     |
| Country:               |                     |
| Postcode:              |                     |

| 3. Description of Proposed Works   |  |  |  |
|--|--|--|--|
| Please describe the proposed works:  |  |  |  |
| TIMBER CLAD IST FLOOR LEVEL EXTERIOR WALLS REPAINT. LOWER WALLS.   |  |  |  |
| ERECT CAPITILEVERED CANOSY PORCH ON I  |  |  |  |
| REPLACE (PRE 1980) UPVC WINDOWS 9 DOORS WI   |  |  |  |
| INSERT ROUND WINDOW IN SOUTH CABLE   | END.   |  |  |
| REPLACE A WINDOW ON SEVEN. C-ROGOR EL  |  |  |  |
| ALTERATION TO N. 9 E. BOUNDARY WALLS. INCLUSING PAINTING 9 LOWERING PREDOCATE REAR GRATE   |  |  |  |
| THERMALLY INSULATINE WALLS FLOORS PANIX ROOF INTERMANY.  |  |  |  |
| Has the work already started? Wes No WTERNAL PLUMBING ELECTRICS & WSULATION.   |  |  |  |
| 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.  House House   | Is a new or altered vehicle access proposed to or from the public highway? Yes No  |  |  |
| Onit: suffix: suffix:  | Is a new or altered pedestrian access  |  |  |
| House name: SAMPHIRE (RENAMED)   | proposed to or from the public highway? Yes No  Do the proposals require any diversions,                                 |  |  |
| Address 1: BUZZA STREET.   | extinguishments and/or creation of public rights of way?   |  |  |
| Address 2: St. MARYS.  | If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/ |  |  |
| Address 3:   | drawing(s):  |  |  |
| Town: St MARYS   | N/A.   |  |  |
| County: ISLES of ScINLY  |  |  |  |
| Postcode (optional): TR21 OJQ  |  |  |  |
| 6. Pre-application Advice  | 7. Trees and Hedges  |  |  |
| Has assistance or prior advice been sought from the local authority about this application?  | Are there any trees or hedges on your own property or on adjoining properties which                                      |  |  |
|  | are within falling distance of your proposed   |  |  |
| If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this | development? Yes Ves Vivo  |  |  |
| application more efficiently).<br>Please tick if the full contact details are not  | plan and state the reference number of any plans or drawings:  |  |  |
| known, and then complete as much possible:   | $    N   \theta$ .   |  |  |
| Officer name:  |  |  |  |
| MR. A. KINC.   |  |  |  |
| Reference:   | Will any trees or hedges need  |  |  |
| PA/19/059/HH   | to be removed or pruned in order to carry out your proposal?   |  |  |
| (must be pre-application submission)  Date (DD MM YYYY):  23/10/19   | If Yes, please show on your plans which trees by giving them   |  |  |
| Details of the pre-application advice received:  | numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale.                    |  |  |
| SEE ATMENED DETAILS.   | A/A  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

VEISIUITZUTO.T

| 8. Parking Will the proposed works   | affect existing car parking arrangements?  | es No                 |  |                   |               |
|--|--|-----------------------|--|-------------------|---------------|
| If Yes, please describe:   |  |                       | Table was a minute to the symmetry of the state of the st |                   |               |
| N/A.   |  |                       |  |                   |               |
|  |  |                       |  |                   |               |
| means related, by birth  | <b>byee / Member</b><br>De of decision-making that the process is open and<br>or otherwise, closely enough that a fair minded and<br>bias on the part of the decision-maker in the local | l informed obs        | erver, having considered the facts, v  | lated to<br>vould | o"            |
| Do any of the following statements apply to you and/or agent? Yes 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 de  | etails of their name, role and how you are related to  | them.                 |  |                   |               |
| M/A  |  |                       |  |                   |               |
| 10. Materials  |  |                       |  |                   |               |
| If applicable, please stat   | e what materials are to be used externally. Include  | type, colour a        | nd name for each material:   |                   |               |
|  | Existing<br>(where applicable)   | Proposed              |  | Not<br>applicable | Don't<br>Know |
| Walls  | CEMENT RENDER.   | CEDAR C<br>K: FLOOR   | LIAIS AND INCULATE<br>EXTERIOR OF PROPERTY.  |                   |               |
| Roof   | CEMENT TILE.   | NATURAL               | SLATE CAT A LATTER DATE  | )                 |               |
| Windows  | PLASTIC UPVC (PRE. 1980)   | West-to-Market Action | UPVC WITH ENERGY<br>T GLAZING.   | ¥                 |               |
| Doors  | SINGLE GLAZED FRONT DOOR.<br>PLASTIC UPIC (OLD) REAR. DOOR.  |                       | EMAL INSULFTED COMPOSITE   |                   |               |
| Boundary treatments<br>(e.g. fences, walls)  | GRANITE TO S. P.W. ELEVATION. BLOCK BARE WALL TO N. 9 E. ELEVATION   | BLEAD IN              | NOBE AINTED WHITE TO WITH NEXT DOOR. WALL TO SE PAINTED TO   | V                 |               |

| 10. Materials                       |   |   |   |    |
|-------------------------------------|---|---|---|----|
| If applicable, please sta           | te what materials are to be used externally. Includ                   | e type, colour and name for each material:  |   |    |
| Vehicle access and<br>hard-standing | PARKINE IS PART OF PORTHCRESSA. RECENERATION & WILL NOT. BE. TOUCHED. | NA.   | Ø |    |
| Lighting                            | No EXISTING EXTERNAL LIGHTING   | FRONT DOOR CANOLY. LIGHT.   | V |    |
| Others<br>(please specify)          | FRONT ENTRANCE DOOR.  NO ROVND HINDOW IN GABLE END.                   | CANTILEVERED CANORY OVER DOOR.<br>ON W. ELEVATION. WOODS SLATE.<br>VIVE ROUNDS WINDOW IN CABLE END<br>S. ELEVATION. |   |    |
| 8 6 10 500 900                      | itional information on submitted plan(s)/drawing(s                    |   |   | No |
| II Yes, please state refe           | rences for the plan(s)/drawing(s)/design and acces                    | s statement.  |   |    |

| 11. Ownership Certificates and A  |   | 1                        |  |  |
|---|---|--------------------------|--|--|
| One Certificate A, B, C, or D, must be completed with this application form   |   |                          |  |  |
|   | CERTIFICATE OF OWNERSHIP - CERTIFICATE A  | under Article 14         |  |  |
| Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or spart of, an agricultural holding** |   |                          |  |  |
| NOTE: You should sign Certificate B. CorD, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.  |   |                          |  |  |
| * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.  |   |                          |  |  |
| Sig   | Or signed - Agent:  | Date (DD/MM/YYYY):       |  |  |
|   |   | 27/10/19                 |  |  |
| I certify/ The applicant certifies that I have 21 days before the date of this application application relates.  *"owner" is a person with a freehold interest  | CERTIFICATE OF OWNERSHIP - CERTIFICATE B relopment Management Procedure) (England) Order 2015 Certificate to elethe applicant has given the requisite notice to everyone else (as listed to n, was the owner* and/or agricultural tenant** of any part of the land or to reasehold interest with at least 7 years left to run.  The procedure of the Town and Country Planning Act 1990 | pelow) who, on the day l |  |  |
| Name of Owner / Agricultural Tenant   | Address   | Date Notice Served       |  |  |
| Traine of a triver, righter and a triver  | 71119-000   |                          |  |  |
|   |   |                          |  |  |
|   |   |                          |  |  |
|   |   |                          |  |  |
|   |   |                          |  |  |
|   |   |                          |  |  |
| Signed - Applicant:   | Or signed - Agent:  | Date (DD/MM/YYYY):       |  |  |
|   |   |                          |  |  |

| 11. Ownership Certificates and   | Agricultural L  | and Declaration (con  | tinued)   |   |
|--|---|---|---|---|
| Town and Country Planning (De<br>I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been<br>the land or building, or of a part "owner" is a person with a freehold interes<br>** "agricultural tenant" has the meaning g<br>The steps taken were:  | velopment Man<br>issued for this ap<br>aken to find out<br>of it, but I have/<br>st or leasehold in | oplication<br>the names and addresses o<br>the applicant has been unal<br>terest with at least 7 years left | land) Order 2015 Certificate  f the other owners* and/or agr ble to do so.  t to run. |   |
|  |   |   |   | Data Nation Consod                              |
| Name of Owner / Agricultural Tenant  |   | Address   |   | Date Notice Served                              |
|  |   |   |   |   |
|  |   |   |   |   |
|  |   | /   |   |   |
|  |   |   |   |   |
|  |   |   |   |   |
|  |   |   |   |   |
| Notice of the application has been pub<br>(circulating in the area where the land  | lished in the follo<br>s situated):   | owing newspaper   | On the following date (whice than 21 days before the dat                              | h must not be earlier<br>e of the application): |
| (CITOCHE STATE SANDERS CHEET STATE S |   |   |   |   |
| Signed - Applicant:  |   | Or signed - Agent:  |   | Date (DD/MM/YYYY):                              |
|  |   |   |   |   |
| DI 1 /D  | CERTIFICAT  | E OF OWNERSHIP - CERTI  | FICATE D  | day Artiple 1/                                  |
| Town and Country Planning (Delicertify/ The applicant certifies that: Certificate A cannot be issued to All reasonable steps have been date of this application, was the have/ the applicant has been un "owner" is a person with a freehold interest "agricultural tenant" has the meaning of the steps taken were:   | r this application aken to find out owner* and/or a able to do so.                                  | n<br>the names and addresses o<br>agricultural tenant** of any<br>terest with at least 7 years left         | f everyone else who, on the da<br>part of the land to which this a                    | v 21 days before the                            |
| -  |   |   |   |   |
| Notice of the application has been publ<br>(circulating in the area where the land is  | shed in the follow situated):   | wing newspaper  | On the following date (whic<br>than 21 days before the date                           | h must not be earlier<br>e of the application): |
|  |   | L North   |   | D-1- (DD /AAA /AAAA)                            |
| Signed - Applicant:  |   | Or signed - Agent:  |   | Date (DD/MM/YYYY):                              |

| 12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed invo  | nformation in support of your proposal. Failure to submit all   |
|--|---|
| the Local Planning Authority (LPA) has been submitted.   |   |
| The original and 3 copies* of a completed and dated application form:  The original and 3 copies* of a design and access s   | atement if  |
| The original and 3 copies* of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:   | completed, dated Ownership  |
| The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:  | F = 10  |
| *National legislation specifies that the applicant must provide the ori<br>total of four copies), unless the application is submitted electronically<br>LPAs may also accept supporting documents in electronic format by<br>You can check your LPA's website for information or contact their pla |   |
| 13. Declaration  |   |
| I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.  | is form and the accompanying plans/drawings and additional<br>facts stated are true and accurate and any opinions given are the                                 |
| Sig Or signed - Agent:   | Date (DD/MM/YYYY):  |
|  | Z7/10/19 (date cannot be pre-application)   |
| 14. Applicant Contact Details  | 15. Agent Contact Details   |
| Telephone numbers  | Telephone numbers   |
| Country code: National number: Extension number:   | Country code: National number: Extension number:  |
|  |   |
|  | Country code: Mobile number (optional):   |
|  | Country code: Mobile number (optional):  Country code: Fax pumber (optional):   |
|  | Country code: Fax number (optional):  |
|  |   |
| 16. Cita Visit   | Country code: Fax number (optional):  |
| 16. Site Visit  Can the site be seen from a public road, public footpath, bridleway o  | Country code: Fax number (optional):  Email address (optional):   |
| 16. Site Visit  Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)   | Country code: Fax rumber (optional):  Email address (optional):   |
| Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:   | Country code: Fax pumber (optional):  Email address (optional):  r other public land? Yes No  Applicant Other (if different from the agent/applicant's details) |
| Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:  Contact name:                                | Country code: Fax pumber (optional):  Email address (optional):  Tother public land? Yes  |
| Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:   | Country code: Fax pumber (optional):  Email address (optional):  r other public land? Yes No  Applicant Other (if different from the agent/applicant's details) |