

Application for Planning Permission. Town and Country Planning Act 1990

https://www.planningportal.co.uk/apply

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 its obligations in regards to the processing of your application. Please refer to its 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:



ISLES OF SCILLY

COUNCIL OF THE ISLES OF SCILLY Planning Department Town Hall, The Parade, St Mary's, Isles of Scilly, TR21 0LW 0 01720 424350

planning@scilly.gov.uk

Publication of applications on 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 Local Planning 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 | ant Name and Address |
|------------------------|--------------------------------|
| Title: | First name: |
| Last name: | COUNCIL OF THE ISLES OF SCILLY |
| Company (optional): | |
| Unit: | House number: House suffix: |
| House name: | Town HALL |
| Address 1: | |
| Address 2: | |
| Address 3: | |
| Town: | ST MYTRY'S |
| County: | ISLES OF SCILLY |
| Country: | |
| Postcode: | TRZI OLW |

| 2. Agent | Name and Address |
|---------------------|-----------------------------------|
| Title: | un First name: Tim |
| Last name: | WRIGLEY |
| Company (optional): | ISLES OF SCILLY COMMUNITY VENTURE |
| Unit: | Plo House number: House suffix: |
| House name: | BRIHMELLON ENTERPRISE CENTRE |
| Address 1: | |
| Address 2: | |
| Address 3: | |
| Town: | ST MARY'S |
| County: | ISLES OF SCILLY |
| Country: | |
| Postcode: | TRZI OJY |

Version 2018.1

| (a. b | |
|---|--|
| 3. Description of the Proposal | |
| Please describe the proposed development, including any change of | use: |
| INSTALLATION OF ELECTRIC VEHIC | CLE CHARGING POINT AND |
| CREATION OF ELECTRIC VEHICLE O | HARGING BAYS. |
| | • |
| | |
| | |
| | |
| 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) |
| Reference no. of permission in principle being | |
| relied on (technical details consent applications only): | |
| 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: | If Yes, please complete the following information about the advice |
| Address 1: | you were given. (This will help the authority to deal with this application more efficiently). |
| | Please tick if the full contact details are not |
| Address 2: | known, and then complete as much as possible: |
| Address 3: | Officer name: |
| Town: | ANDREW KING |
| County: | Reference: |
| Postcode | P/19/005 |
| (optional): | Date (DD/MM/YYYY): (must be pre-application submission) |
| (must be completed if postcode is not known): | (must be pre-application submission) |
| Easting: 09 3140 Northing: 010569. | Details of pre-application advice received? |
| Description: | LETTER AND MEETINGS OUTLINING |
| LOCATED OPPOSITE POLICE STATION | APPLICATION REQUIREMENTS. |
| JUST BELOW POLICE VEHICLE | MILCOLON |
| CHARGE PARKING BAY. | |
| | |
| [1] | |
| | |
| | |
| | |

| 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? Yes No |
| Is a new or altered pedestrian access proposed to or from the public highway? | If Yes, please provide details: |
| 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 creation of rights of way? Yes No | Have arrangements been made for the separate storage and collection of recyclable waste? Yes No |
| 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: |
| ž | |
| 8. Authority Employee / Member It is an important principle of decision-making that the process is of means related, by birth or otherwise, closely enough that a fair-min conclude that there was bias on the part of the decision-maker in the second | ded and informed observer, having considered the facts, would he local planning authority. |
| 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 details of their name, role and how you are r | |
| HOWEVER IT SHOULD BE NOTED | THAT THIS APPLICATION IS |
| MADE BY THE COUNCIL OF THE | ISLES OF SCILLY. |
| | |

| 9. Materials If applicable, please sta | ite what ma | aterials are to be used exteri | nally. Include | e type, colour and name for e | each material: | | |
|---|--------------------|---|----------------|--|----------------|-------------------|---------------|
| | Existing (where ap | oplicable) | | Proposed | | Not applicable | Don't Know |
| Walls | | | | | | 2 | |
| Roof | | | | | | P | |
| Windows | | | | | | | |
| Doors | | | | | | | - 🔲 |
| Boundary treatments (e.g. fences, walls) | | | | | | P | |
| Vehicle access and hard-standing | TAR | M4C | | CONCRETE UPS | NO FOR | | |
| Lighting | | | | | | 4 | |
| Others (please specify) | | | | | | | |
| | | | | design and access stateme | nt? Yes | | No |
| 2. LOCATION, 3. PLANNING | BLOCK | the plan(s)/drawing(s)/design AND FLOOR PLA MENT T ASSESSMENT | | s statement: S. ELEVATION (|)RAWING. | | |
| 10. Vehicle Parkin | g | | | | | | |
| | | the existing and proposed r | | | Difference | | |
| Type of Vehicl | е | Existing | Tota | tal proposed (including Difference spaces retained) in space | | | |
| Cars Light goods vehic public carrier veh | cles/ | 2 | | 2 | D | | |
| Motorcycles | | | | | | | |
| Disability space | es | | | | | | \neg |
| Cycle spaces | | | | :7 | | | |
| Other (e.g. Bus | 5) | | | | | | |

Other (e.g. Bus)

| 11. Foul Sewage | 12. Assessment of Flood Risk |
|---|---|
| Please state how foul sewage is to be disposed of: | Is the site within an area at risk of flooding? (Refer to the |
| Mains sewer Cess pit | Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.) |
| Septic tank Other | ☐ 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 | VEHICLE PARKING |
| 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 likelihood of the following being affected adversely or conserved | Is the site currently vacant? Yes |
| 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: | İ |
| Yes, on the development site Yes, on land adjacent to or near the proposed development | |
| No | When did this use end (if known)? |
| b) Designated sites, important habitats or other biodiversity | (date where known may be approximate) |
| features: Yes, on the development site | Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application. |
| Yes, on land adjacent to or near the proposed development | Land which is known to be contaminated? |
| No | Land which is known to be contaminated? Yes Yes |
| c) Features of geological conservation importance: | Land where contamination is suspected for all or part of the site? Yes No |
| Yes, on the development site Xes, on land adjacent to or near the proposed development | A proposed use that would |
| No | be particularly vulnerable to the presence of contamination? |
| | |
| 15. Trees and Hedges | 16. Trade Effluent |
| Are there trees or hedges on the proposed development site? | Does the proposal involve the need to dispose of trade effluents or waste? Yes No |
| And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes | If Yes, please describe the nature, volume and means of disposal of trade effluents or waste |
| If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be | |
| submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'. | |

| | Propos | sed | Hous | sing | | | | | Existi | ng | Hous | ing | | | |
|--------------------------------|-------------------------|-------|-----------|--------|--------------------|-----------------|-------|-----------------------------------|--------------|-------|----------------|----------|------------|-----------------|------|
| Market Housing | Not known | 1 | | | Bedr 4+ | ooms Unknown | Total | Market Housing | Not known | 1 | Numb | _ | Bedr 4+ | ooms Unknown | Tota |
| Houses | | Ť | 1 | | <u> </u> | | N. | Houses | | Ė | | | | | |
| Flats/maisonettes | | | | | | | 0 | Flats/maisonettes | | | | | | | |
| Sheltered housing | | | | | | | | Sheltered housing | | | | | | | |
| Bedsit/studios | | | | | | | | Bedsit/studios | | | | | | | |
| Cluster flats | | | | | | | No. | Cluster flats | | | | | | | |
| Other | | | | | | | 7. | Other | | | | | | | 7 |
| | | To | otals (a | + b + | c + a | (+ e + f) = | | | | То | tals (a | + b + | c + d | + e + f) = | = |
| Social, Affordable | Able Number of Regrooms | | | Total | Social, Affordable | | | Numb | or of | Dode | 20000 | Tota | | | |
| or Intermediate Rent | Not known | 1 | 2 | 3 | 4+ | Unknown | Total | or Intermediate | Not known | 1 | 2 | 3 | 4+ | Unknown | _ |
| Houses | | | | | | | | Houses | | | | | | | 7 |
| Flats/maisonettes | | | | | | | < . | Flats/maisonettes | | | | | | | |
| Sheltered housing | | | | | | | 5 | Sheltered housing | | | | | | | : |
| Bedsit/studios | | | | | | | U | Bedsit/studios | | | | | | | |
| Cluster flats | | | | | | | | Cluster flats | | | | | | | |
| Other | | | | | | | | Other | | | | | | | 1 |
| | - | То | otals (a | + b + | c + a | (+e+f)= | 3. | | - | To | tals (a | + b + | c + d | + e + f) = | P |
| Affordable Home Ownership | Not known | 1 | _ | | | ooms | Total | Affordable Home Ownership | Not known | 1 | Numb | | | | Tota |
| Houses | KIIOWII | | 2 | 3 | 4+ | Unknown | | Houses | KIIOWII | | 2 | 3 | 4+ | Unknown | |
| Flats/maisonettes | | | | | | | | Flats/maisonettes | $\pm \Box$ | | | | | | |
| Sheltered housing | | | 1 | | | | | Sheltered housing | | _ | | | | | |
| Bedsit/studios | +51 | | | | | | | Bedsit/studios | | | | | | | ÷ |
| Cluster flats | 15 | | | | | | | Cluster flats | | _ | | | | | |
| Other | | | | | | | | Other | | | | | | | |
| Outer | | To | tals (a | + b + | c + d | l + e + f) = | | Other | <u> </u> | To | tals (a | + h + | c + d | + e + f) = | |
| | 1 | | | | | | Tatal | | 11 | | | | | | Taba |
| Starter Homes | Not known | 1 | Numb 2 | er or | | Unknown | Total | Starter Homes | Not known | 1 | Numb 2 | 3 | | Unknown | Tota |
| Houses | | Ė | | | | | | Houses | | Ť | - | | Ė | | |
| Flats/maisonettes | | | | | | | | Flats/maisonettes | | | | | | | |
| Bedsit/studios | | | | | | | | Bedsit/studios | | | | | | | |
| Other | | | | | | | | Other | | | | | | | T |
| | | | To | tals (| a + b | + c + d) = | | | | | To | tals (| a + b | + c + d) = | |
| Self Build and Custom Build | Not | | Numb | _ | _ | | Total | Self Build and | Not | | Numb | | _ | | Tota |
| Houses | known | _1_ | 2 | 3 | 4+ | Unknown | | Custom Build Houses | known | _1_ | 2 | 3 | 4+ | Unknown | _ |
| Flats/maisonettes | | _ | | | | | | | | | 1 | | | | |
| Bedsit/studios | | | | | | | | Flats/maisonettes Bedsit/studios | | | | | | | - |
| Other | | | - | | | | | Other | | | | | | | |
| Other | | | To | tale / | 9 ± h | + c + d) = | | Otriei | | | Т. | tale (| 2 + 4 | + 0 + 0 - | - |
| | | | 10 | iais (| a T D | + 0 + u) = | | | | | 10 | ital\$ (| a + D | + c + d) = | |
| | | | | | | | | | | | | | | T | |
| Total proposed res | idential ι | ınits | (A | + B + | C + D | + E) = | | Total existing re | esidentia | l uni | ts | F+G | + H + | 1 + J) = | |

| | | | | Non-residenti | • | | | |
|-------------------|-----------------------------|--------------------------|-------------------|--|--|-------------------------------------|--|---|
| | | | | in or change of us | | | | → 160 |
| | se class/type | | Not applicable | Existing gross internal floorspace (square metres) | Gross internal to be lost by use or del (square n | floorspace 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 | nops | | | | | | |
| | Net trad | able area: | | | | | | |
| A2 | | cial and nal services | | | | | | |
| A3 | Restauran | ts and cafes | | | | | | |
| A4 | Drinking es | tablishments | | ·•1. | | | | |
| A5 | Hot food | takeaways | | | | | | |
| B1 (a) | | er than A2) | | | | | | |
| B1 (b) | | rch and opment | | | | | | |
| B1 (c) | Light in | ndustrial | | | | | | |
| B2 | General | industrial | | | | | | |
| B8 | | distribution | | | | | | |
| C1 | | nd halls of dence | | | | | | |
| C2 | | l institutions | | | | | | |
| D1 | | sidential utions | | | | | | |
| D2 | Assembly | and leisure | | | | | | |
| OTHER | | | | | | | | |
| Please Specify | | | | | | | | |
| | To | otal | | | | | | |
| In a | ddition, for ho | tels, residen | | | | | licate the loss or gain of | rooms |
| Use class | Type of use | Not applicable | Exist | ing rooms to be lo of use or demo | est by change olition | Total room ch | s proposed (including anges of use) | Net additional rooms |
| C1 | Hotels | | | | | | | |
| C2 | Residential Institutions | | | | | | | |
| OTHER | | | | | | | | |
| Please Specify | | | | | | | | |
| | ployment complete the | | ormat | ion regarding em | ployees: | /A | | |
| | | | | Full-time | Part | time | | al full-time juivalent |
| | isting employ | | | | | | | |
| Pro | posed emplo | yees | | | | | | |
| 20. Ho | urs of Ope | ning | | | | | <u></u> | |
| If known | , please state | the hours of | f open | ing (e.g. 15:30) fo | or each non-res | sidential use | · · · | |
| | Use | Me | onday | to Friday | Saturda | / | Sunday and Bank Holidays | Not known |
| EV C | NARGINO | 21 | 4 41 | ıs | 24413 | | 24 HRS. | |
| | | | | | | | | |
| <u></u> | | | | | | | | |
| 21. Site | Area | | | | | | | |
| Please st | ate the site a | rea in hectare | es (ha | 0.002 | 6 | | | |

| 22. Industrial or Commercial Proce | sses | and Machine | ry | | |
|---|-------------------|---|---|---------------------------------|---|
| 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 | icts in includ | E | | | |
| Is the proposal a waste management develo | pmer | nt? Yes | No | | |
| If the answer is Yes, please complete the fol | lowing | g table: | | | |
| | Not applicable | The total capa including engine allowance for tonnes if solid | city of the void in o eering surcharge a cover or restoration I waste or litres if I | and making no n material (or | 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 | | | | | |
| Recycling facilities construction, demolition and excavation waste | | | | | |
| Storage of waste | | | | | |
| Other waste management | H | | | | |
| Other developments | | | | | |
| Please provide the maximum annual operat | tional | throughput of the | following waste s | streams: | |
| Municipal | | | | | |
| Construction, demolition and e | xcava | ation | | | |
| Commercial and industr | rial | | | | |
| Hazardous | | | | | |
| If this is a landfill application you will need to planning authority should make clear what | o prov inforn | vide further inform nation it requires | nation before your on its website. | r application can | be determined. Your waste |
| 23. Hazardous Substances | | | | | |
| Does the proposal involve the use or storage the following materials in the quantities stat | | | No | Not applica | ble |
| If Yes, please provide the amount of each su | ıbstan | ce that is involve | d: | | |
| Acrylonitrile (tonnes) | E | Ethylene oxide (to | nnes) | | Phosgene (tonnes) |
| Ammonia (tonnes) | Hydr | ogen cyanide (to | nnes) | Su | phur dioxide (tonnes) |
| Bromine (tonnes) | l | Liquid oxygen (to | nnes) | VI K. | Flour (tonnes) |
| Chlorine (tonnes) Lie | quid p | etroleum gas (to | nnes) | Refined | d white sugar (tonnes) |
| Other: | | | Other: | <u>17-</u> | |
| Amount (tonnes): | | | Amount (tonn | nes). | |

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I 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 is part of, an agricultural holding* NOTE: You should sign Certificate B, C or D, 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. Signed - Applicant: Date (DD/MM/YYYY): 28/05/20185 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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* and/or agricultural tenant** of any part of the land or building to which this application relates. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Date Notice Served Address

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: Name of Owner / Agricultural Tenant Date Notice Served Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier than 21 days before the date of the application): (circulating in the area where the land is situated): Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. * "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: On the following date (which must not be earlier Notice of the application has been published in the following newspaper than 21 days before the date of the application): (circulating in the area where the land is situated): Or signed - Agent: Signed - Applicant: Date (DD/MM/YYYY):

| 25. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application being deemed into the Local Planning Authority (LPA) has been submitted. | e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by | | | | | |
|---|--|--|--|--|--|--|
| The original and 3 copies* of a completed and dated application form: | The correct fee: | | | | | |
| The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details): The original and 3 copies* of the completed, dated | | | | | |
| The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application: | Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings): | | | | | |
| *National legislation specifies that the applicant must provide the ortotal of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by provided the control of the control | or, the LPA indicate that a smaller number of copies is required. | | | | | |
| 26. Declaration I/we hereby apply for planning permission/consent as described in t information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. | his form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the | | | | | |
| Signed - Applicant: Or signed - Agent: | Date (DD/MM/YYYY): | | | | | |
| | ZS/OS/マッマン (date cannot be pre-application) | | | | | |
| | | | | | | |
| 27. Applicant Contact Details | 28. Agent Contact Details | | | | | |
| 27. Applicant Contact Details Telephone numbers | 28. Agent Contact Details Telephone numbers | | | | | |
| | | | | | | |
| Telephone numbers Extension | Telephone numbers Extension | | | | | |
| Telephone numbers Country code: National number: Extension number: | Telephone numbers Country code: National number: Extension number: | | | | | |
| Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): | Telephone numbers Country code: Country code: Country code: Country code: Country code: | | | | | |
| Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): | Telephone numbers Country code: Co | | | | | |
| Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | Telephone numbers Country code: Co | | | | | |
| Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): | Telephone numbers Country code: Co | | | | | |
| Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | Telephone numbers Country code: Country code: Country code: Country code: Final address (optional): Pagent Applicant Other (if different from the | | | | | |
| Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 29. 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 | Telephone numbers Country code: National number: Country code: Country code: Country code: Extension number: Country code: Country code: Email address (optional): Tother public land? Yes Other (if different from the | | | | | |
| Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 29. 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) | Telephone numbers Country code: Country code: Country code: Country code: Final address (optional): Pagent Applicant Other (if different from the | | | | | |

Email address: