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> **RECEIVED** By Emma Kingwell at 8:39 am, Oct 14, 2020

## Application for Planning Permission. 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 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 01720 424350

Agent Name and Address

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 SOLLY
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:	TRIZI OLW

	Trainio ana 7 taan 000
Title:	un First name: Tim
Last name:	WRIGLEY
Company (optional):	ISLES OF SCILLY COMMUNITY VENTURE
Unit:	9/10 House number: House suffix:
House name:	BRIHMELLOW ENTERPRISE CENTRE
Address 1:	
Address 2:	
Address 3:	
Town:	ST MARY'S
County:	ISLES OF SCILLY
Country:	0
Postcode:	TRZI OJY

3. Description of the Proposal					
Please describe the proposed development, including any change of					
INSTACLATION OF ADDITIONAL SECA	• •				
PORTHMELLON ENTERPRISE CENTRE.					
DEVELOPMENT IS AN ALTERNATIVE OF	·				
SOLAR CANORY ELEMENT OF PUNNIN	IF PERMISSION ONWHIED UNDER				
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):  Has the building, work or change of use been completed?	(date must be pre-application submission)  Yes No				
If Yes, please state the date when the building, work	(date must be pre-application submission)				
or change of use was completed: (DD/MM/YYYY):  Reference no. of permission in principle being	(date must be pre-application submission)				
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 authority about this application?				
Unit: House House suffix:	Yes No				
House name: PORTHMELLON ENTERPRISE CENTRE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: HUFH TOWN	application more efficiently).  Please tick if the full contact details are not				
Address 2: ST MYHTY'S	known, and then complete as much as possible:				
Address 3: ISGS OF SCILLY	Officer name:				
Town:	ANDREW KING				
County:	Reference:				
Postcode (optional): TRZI OJY	P/19/005				
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)				
Easting: Northing:	Details of pre-application advice received?				
Description:	LETIEN AND MEETINGS OUTLINING				
	APPLICATION REQUIREMENTS.				
	MULICIAO/O TECEGORIA DE				

6. Pedestrian and Vehicle Access, Roa	ds and Righ	nts of Way	7. Waste Storage and Collection		
Is a new or altered vehicle access proposed to or from the public highway?	Yes	No	Do the plans incorporate areas to store and aid the collection of waste?	☐ Yes	□ <b>/</b> No
Is a new or altered pedestrian access proposed to or from the public highway?	Yes	□ No	If Yes, please provide details:		
Are there any new public roads to be provided within the site?	Yes	No			
Are there any new public rights of way to be provided within or adjacent to the site?	Yes	No			
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 que details on your plans/drawings and state the (s)/drawings(s)	estions, pleas e reference o	se show of the plan	If Yes, please provide details:		
	enough that	t a fair-minde	n and transparent. For the purposes of this quested and informed observer, having considered the local planning authority.		
Do any of the following statements apply to	you and/or a	agent?	Yes With respect to the authority, (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected mer	aff	
If Yes, please provide details of their name,	role and how	you are rela	ated to them.		
HOWEVER IT SHOULD	BE NO	TED -	THAT THIS APPLICATION	15	
MADE BY THE COUNC	al of	THE	ISLES OF SCILLY.		

	Existing			Proposed		Not applicable	Don't
	(where app	licable)		rioposed		applic	Know
Walls							
Roof	Rook 1 Residuo THERM	LAS EXISTING S LTHIC AND SOU AL PHNEUS	bliAR AR	ADDITIONAL SOL	AN PANELS		
Windows						V	
Doors							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing						d	
Lighting						4	
Others (please specify)							
Are you supplying add	itional inform	ation on submitted plan(	s)/drawing(s)	ı /design and access stateme	ent? Yes		No
If Yes, please state refe	erences for th	e plan(s)/drawing(s)/desi	gn and access	s statement:	4. —		
2 BOCATION 3. BLOCK PLA 4. PLANNING	PLAN		5 LAYO	vi flan AND um inge (mlaet 1985)	age Smer?		
3. Block MA	W		b. reid				
4. PLANNING	SIMIEM	A) (					
I0. Vehicle Parkin	g						
		ne existing and proposed	Ti-		Diff		
Type of Vehic	le	Total Existing		l proposed (including spaces retained)	Difference in spaces		
Cars		0		٥	0		
Light goods vehi public carrier veh	cles/ icles						
Motorcycles							
Disability space	es						
Cycle spaces							
Other (e.g. Bus	s)						
Other (e.g. Bus	s)						

11. Foul Sewage	12. Assessment of Flood Risk
I NIK I	
Please state how foul sewage is to be disposed of:  Mains sewer  Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for information as necessary.
Suite	☐ 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?	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 plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
plant(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	OFFICE BULDING.
likelihood that any important biodiversity or geological 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?
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	When did this use end (if known)?
✓ No	DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate)  Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is
Yes, on the development site	suspected for all or part of the site?  Yes  No
Yes, on land adjacent to or near the proposed development	A proposed use that would
No	be particularly vulnerable to the presence of contamination?
140	
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?
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the development or might be important as part	of trade effluents or waste
of the local landscape character?  Yes  No	
If Yes to either or both of the above, you may 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	III
contain, in accordance with the current 'BS5837: Trees in relation to	

17. Residential U Does your proposal i If Yes, please comple	nclude th	e gai	in, loss	s or cl	hange	of use of	resider low:	ntial units? Yes	d	<b>1</b> 0					
	Propos	sed	Hous	sing					Existi	ing l	Hous	ing			
Market Housing	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Total	Market Housing	Not known	1	Numb	er of		ooms Unknown	Total
Houses								Houses							
Flats/maisonettes								Flats/maisonettes							
Sheltered housing							nr.	Sheltered housing							
Bedsit/studios								Bedsit/studios							
Cluster flats								Cluster flats							
Other								Other							
		То	tals (a	+ b +	c + d	+ e + f) =				To	tals (a	+ b +	c + d	+ e + f) =	
Social, Affordable				Total	Social, Affordable	Not		Numb	er of	Bedr	ooms	Total			
or Intermediate Rent	known	1	2	3	4+	Unknown	_	or Intermediate	known	1	2	3	4+	Unknown	
Houses							-	Houses			$\vdash$				
Flats/maisonettes								Flats/maisonettes			$\vdash$				
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Cluster flats								Cluster flats							
Other								Other							
		То	tals (a	+ b +	c + d	+ e + f) =	-		Totals $(a + b + c + d + e + f) =$						
Affordable Home	Not		Numb	er of	Bedr	ooms	Total	Affordable Home	Not		Numb	er of	Bedr	ooms	Total
Ownership	known	1	2	3	4+	Unknown		Ownership	known	1	2	3		Unknown	
Houses								Houses							4
Flats/maisonettes								Flats/maisonettes							,KC
Sheltered housing								Sheltered housing							
Bedsit/studios							11	Bedsit/studios							
Cluster flats							N.	Cluster flats							
Other								Other							
		То	tals (a	+ b +	c + d	+ e + f) =				To	tals (a	+ b +	c + d	+ e + f) =	
Starter Homes	Not known	1	Numb	er of		ooms Unknown	Total	Starter Homes	Not known	1	Numb 2	er of		ooms Unknown	Total
Houses								Houses							
Flats/maisonettes								Flats/maisonettes						,	
Bedsit/studios								Bedsit/studios							
Other								Other							
			То	tals (	a + b	+ c + d) =	1				То	tals (	a + b	+ c + d) =	
Self Build and Custom Build	Not known	1	Numb	er of		ooms Unknown	Total	Self Build and Custom Build	Not known	1	Numb	er of	_	ooms	Total
Houses							16	Houses							
Flats/maisonettes							7	Flats/maisonettes							
Bedsit/studios								Bedsit/studios							
Other								Other							
Totals $(a + b + c + d) =$										To	tals (	a + b	+ c + d) =		
Total proposed res	idential ι	ınits	(A	+ B +	C + D	+ E) =		Total existing re	esidentia	l unit	ts (	'F + G	+ H +	( + J) =	

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

		•		Non-residenti	-			/
				in or change of us				No
If y	ou have answ	ered Yes to		estion above plea			<u> </u>	N - 4 - 7 PO 1
U	se class/type o	of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by use or der (square n	change of molition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	She	ops						
	Net trada							
A2	Financ profession							
A3	Restaurants	s and cafes						
A4	Drinking est	ablishments						
A5	Hot food to	akeaways						
B1 (a)	Office (other							
B1 (b)	Resear develo							
B1 (c)	Light in							
B2	General i	industrial						
B8	Storage or	distribution						
C1	Hotels an reside							
C2	Residential							
D1	Non-res institu							
D2	Assembly a							
OTHER								
Please Specify								
Орсспу	To	tal						
In ac	ddition, for ho	tels, residen	itial in:	stitutions and host	tels, please ad	ditionally ind	icate the loss or gain of	rooms
Use class	Type of use	Not applicable	Existi	ng rooms to be lo	st by change	Total room	s proposed (including anges of use)	Net additional rooms
C1	Hotels	арріісавіе		or use or usine	milori	Oi i	anges of use;	
C2	Residential							
OTHER	Institutions							
Please								
Specify								
	ployment					IIA		
Please o	complete the t	following info	ormat	ion regarding emp	oloyees:	<u>'</u>	Tota	al full-time
Г.,	:_+:			Full-time	Part	-time		uivalent
	isting employed							
	poodu ciripio)	,000						
	urs of Ope	•					proposed MA	
If known				ing (e.g. 15:30) fo			proposed: ' ' Sunday and	
	Use	Mo	onday	to Friday	Saturda	У	Bank Holidays	Not known
		_						
21. Site	e Area							
Please st	ate the site are	ea in hectare	es (ha)	0.0007	2			

22. Industrial or Commercial Proce	sses	and Machine	ery		
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	n would cluding le the	/		
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 cap including engir allowance for tonnes if soli	acity of the void in neering surcharge cover or restoration d waste or litres if	and making no on 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	П				
Other waste management					
Other developments					
Please provide the maximum annual operat	ional	throughput of th	e following waste	streams:	
Municipal					
Construction, demolition and e	xcava	ation			
Commercial and industr	ial				
Hazardous					
If this is a landfill application you will need t planning authority should make clear what	o prov inform	vide further infor nation it requires	mation before you on its website.	ir application can	be determined. Your waste
23. Hazardous Substances					
Does the proposal involve the use or storage the following materials in the quantities state			No	Not applica	hle
If Yes, please provide the amount of each su		10			
Acrylonitrile (tonnes)		thylene oxide (to	1	Ī	Phosgene (tonnes)
Ammonia (tonnes)		ogen cyanide (to		] ] Sul	phur dioxide (tonnes)
Bromine (tonnes)	•	iquid oxygen (to		j	Flour (tonnes)
Chlorine (tonnes) Lic	quid p	etroleum gas (to	nnes)	Refined	d white sugar (tonnes)
Other:			Other:		
Amount (tonnes):			Amount (ton	nes).	

Version 2018.1

### 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: Or signed - Agent: Date (DD/MM/YYYY): 2010/2020 **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 On the following date (which must not be earlier than 21 days before the date of the application): Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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: Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

25. 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 in the Local Planning Authority (LPA) has been submitted.	ne 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 Ownership Certificate (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:	and Article 14 Certificate (Agricultural Holdings):					
*National legislation specifies that the applicant must provide the or total of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl	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):					
	パルク (date cannot be pre-application)					
27. Applicant Contact Details	28. Agent Contact Details					
Telephone numbers	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: National number: Extension number:  Country code: Mobile number (optional):					
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):					
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):					
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):					
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):					
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  29. Site Visit	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Tother public land? Yes No  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):  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: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Tother public land?  Yes  No					
Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (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)	Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Tother public land? Yes No  Applicant Other (if different from the					

Email address: