

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

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, St Mary's, Isles of Scilly, TR21 0LW №01720 424455 ♣planning@scilly.gov.uk

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	ant Name and Address
Title:	MISS First name: HANNAH
Last name:	BARCLAY
Company (optional):	
Unit:	House humber: House suffix:
House name:	
Address 1:	BAY VIEW TERRACE
Address 2:	PORTHMELLON
Address 3:	
Town:	ST MARY'S
County:	ISLES OF SCILLY.
Country:	
Postcode:	TR21 ONE

2. Agent	Name and Address
Title:	First name:
Last name:	*
Company (optional):	
Unit:	House number: House suffix:
House name:	· ·
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

3. Description of Proposed Works		
Please describe the proposed works:		
RE-BUILD FIRST FLOOR EXTENSION		
REPLACE WINDOWS + DOORS		
ALTERATIONS + IMPROVEMENTS		
*		
8		
Has the work already started?	HORK NOT REQUIRING PLANNING HAS COMMENCED	
If Yes, please state when the work was started (DD/MM/YYYY): (date must be pre-application submission		
Has the work already been completed? Yes No		
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: number: 6 suffix:	Is a new or altered pedestrian access	
House name:	proposed to or from the public highway? Yes No Do the proposals require any diversions,	
Address 1: BAY VIEW TERRACE	extinguishments and/or creation of public rights of way?	
Address 2: PORTH MELLON	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: ST MARY S	drawing(s):	
Town: [SLES OF SCILLY		
County:		
Postcode (optional): TRZI ONF		
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	
If Yes, please complete the following information about the advice	are within falling distance of your proposed development?	
you were given. (This will help the authority to deal with this	If Yes, please mark their position on a scaled	
application more efficiently). 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:		
Officer name: USA WALTON		
Reference:		
nelerence.	Will any trees or hedges need	
Date (DD MM YYYY):	to be removed or pruned in order to carry out your proposal?	
(must be pre-application submission)	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.	
WE ARE WAITING TO HEAR BACK TO ARRANGE A MEETING	Grawnig(s) and indicate the scale.	
TO AKKANGE A MEETING		
	(*)	

8. Parking Will the proposed works affect existing car parking arrangements? Yes No					
If Yes, please describe:					
	w)				
means related, by birth	loyee / Member ciple of decision-making that the process is open an h or otherwise, closely enough that a fair minded ar as bias on the part of the decision-maker in the loca	nd informed obs	erver, having considered the facts.	elated would	to"
Do any of the following statements apply to you and/or agent? Yes No 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 related to them.					
10. Materials					
If applicable, please sta	ate what materials are to be used externally. Include	e type, colour ar	nd name for each material:	T	1
	Existing (where applicable)	Proposed		Not applicable	Don't Know
Walls	TIMBER CLADDING (BROWN STAIN)	FIBRE CE	(GREY)		
Roof	GRP FLAT ROOF (GREY)	GRP FLA	IT ROOF (GREY)		
Windows	UPVC (WHITE)	UPUC ((GREY)		
Doors	UPVC (WHITE)	ypvc	(GREY)		
Boundary treatments (e.g. fences, walls)					

10. Materials			
If applicable, please stat	te what materials are to be used externally. Include type, colour and name for each material:		
Vehicle access and hard-standing		Ø	
Lighting		Ø	
Others (please specify)			
Are you supplying addi	itional information on submitted plan(s)/drawing(s)/design and access statement?		No
If Yes, please state refer	rences for the plan(s)/drawing(s)/design and access statement:		

11. 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 intere ** "agricultural holding" has the meaning	st or leasehold interest with at least 7 years left to run. given by reference to the definition of "agricultural tenant" in sect	tion 65(8) of the Act.
Clancel Applicant	Or signed - Agent:	Date (DD/MM/YYYY):
		10.08.21
I certify/ The applicant certifies that I ha 21 days before the date of this applicati application relates. * "owner" is a person with a freehold intere	OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2015 ve/the applicant has given the requisite notice to everyone el on, was the owner* and/or agricultural tenant** of any part of st or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1990	lse (as listed below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

11. 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 (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): **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: 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):

12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.				
The original and 3 copies* of a The original and 3 copies	copies* of a The correct fee:			
completed and dated application form: 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: The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	l within a The original and 3 copies* of the completed, dated Ownership			
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.				
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.	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the			
gned - Agent:	Date (DD/MM/YYYY):			
	(date cannot be pre-application)			
	pre-application			
	15. Agent Contact Details			
Telephone numbers	Telephone numbers			
Extension	Extension			
Country code: National number: number:	Country code: National number: number:			
tional):				
in the state of th	Country code: Mobile number (optional):			
Country code: Fax number (optional):	Country code: Mobile number (optional): Country code: Fax number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Country code: Fax number (optional): [mail address (optional):	Country code: Fax number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional): Email address (optional):			
Country code: Fax number (optional): The laddress (optional): The la	Country code: Fax number (optional): Email address (optional): Tother public land? Yes No			
Country code: Fax number (optional): The ill address (optional): The ill	Country code: Fax number (optional): Email address (optional):			
Country code: Fax number (optional): The laddress (optional): The la	Country code: Fax number (optional): Email address (optional): Tother public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)			
Country code: Fax number (optional): The laddress (optional): The la	Country code: Fax number (optional): Email address (optional): Tother public land? Yes No Applicant Other (if different from the			
Country code: Fax number (optional): The laddress (optional): The la	Country code: Fax number (optional): Email address (optional): Tother public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)			