1. Site Address

Number

Suffix

COUNCIL OF THE ISLES OF SCILLY

Planning Department Town Hall, St Mary's, Isles of Scilly, TR21 OLW ೨೦1720 424455 ✓⊕planning@scilly.gov.uk RECEIVED

By Liv Rickman at 10:20 am, Jan 21, 2022

Application for listed building consent for alterations, extension or demolition of a listed building.

Planning (Listed Buildings and Conservation Areas) Act 1990

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.

| Property name | Lloyds Bank | |
|--|--|--|
| Address line 1 | Hugh Street | |
| Address line 2 | | |
| Address line 3 | | |
| Town/city | St Mary's, Isles of Scilly | |
| Postcode | TR210PW | |
| Description of site locat | ion must be completed if postcode is not known: | |
| Easting (x) | 90183 | |
| Northing (y) | 10610 | |
| Description | | |
| | | |
| | | |
| | | |
| 2. Applicant Detai | ils | |
| 2. Applicant Detai | i ls Mr | |
| | | |
| Title | Mr | |
| Title First name | Mr Mark | |
| Title First name Surname | Mr Mark Lickley | |
| Title First name Surname Company name | Mr Mark Lickley Lloyds Banking Group | |
| Title First name Surname Company name Address line 1 | Mr Mark Lickley Lloyds Banking Group | |
| Title First name Surname Company name Address line 1 Address line 2 | Mr Mark Lickley Lloyds Banking Group | |
| Title First name Surname Company name Address line 1 Address line 2 Address line 3 | Mr Mark Lickley Lloyds Banking Group 25 Gresham Street | |

| 2. Applicant Detail | ls | |
|---|---|---|
| Country | | |
| Postcode | EC2V 7HN | |
| Are you an agent acting | g on behalf of the applicant? | Yes □ No |
| Primary number | | |
| Secondary number | | |
| Fax number | | |
| Email address | | |
| | | |
| 3. Agent Details | | |
| Title | Mr | |
| First name | Trevor | |
| Surname | Jones | |
| Company name | Trevor Jones | |
| Address line 1 | 35 Low Hall Road | |
| Address line 2 | Horsforth | |
| Address line 3 | | |
| Town/city | Leeds | |
| Country | United Kingdom | |
| Postcode | LS18 4FQ | |
| Primary number | | |
| Secondary number | | |
| Fax number | | |
| Email | | |
| Removal of external sig | | of proposals to alter, extend or demolish the listed building(s): |
| | | |
| 5. Listed Building | Grading | |
| What is the grading of to Don't know Grade I Grade II* Grade II | he listed building (as stated in the list of Buildings of Spe | cial Architectural or Historical Interest)? |

| 5. Listed Building Grading Is it an ecclesiastical building? | g | □ Don't know □ Yes |
|--|---|---|
| 6. Demolition of Listed Bu | uilding rtial or total demolition of a listed building? | O Vee C Ne |
| Does the proposal include the par | tial of total demolition of a listed building: | © Yes ● No |
| 7. Related Proposals Are there any current applications | s, previous proposals or demolitions for the site? | ⊚ Yes |
| | | |
| 8. Immunity from Listing | | |
| Has a Certificate of Immunity fron | n Listing been sought in respect of this building? | © Yes ■ No |
| 9. Listed Building Alterati | ons | |
| Do the proposed works include al | | ∨oo |
| If Yes, do the proposed works in | Ç | |
| a) works to the interior of the build | | ⊚ Yes |
| b) works to the exterior of the buil | ding? | ⊚ Yes |
| c) works to any structure or objec | t fixed to the property (or buildings within its curtilage) internally | |
| | II, ceiling or floor finishes (e.g. plaster, floorboards)? | |
| | stions is Yes, please provide plans, drawings and photographs | |
| items to be removed. Also include plan(s)/drawing(s). | e the proposal for their replacement, including any new means of | of structural support, and state references for the |
| 50252700-AREX-00-0100 Groun 50252700-AREX-E1-0200 Elevat 50252700-AR01-00-0110 Groun 50252700-AR01-E1-0210 Elevat | tions as existing d floor plan as proposed | |
| 40 Meteriale | | |
| 10. Materials Does the proposed development | require any materials to be used? | OV ON |
| | , | |
| excluded | dropdown list to select the type, clicking 'Add' and entering all t | , |
| Туре | Existing materials and finishes | Proposed materials and finishes |
| External Walls | Rendered | Infill redundant fixing holes with lime mortar to match the render as closely as possible |
| Windows | About the external ATM is masonry walling with a section of window above | Remove the infill walling about the external ATM. Remove the section of window from above the external ATM. Install a new timber framed window to match the adjacent ground floor windows |
| If Yes, please state references for 50252700-AREX-00-0100 Groun | rmation on submitted plans, drawings or a design and access s the plans, drawings and/or design and access statement d floor plan as existing | statement? Yes No |
| 50252700-AREX-E1-0200 Eleva | tions as existing | |

| 0. Materials | | | | |
|---|--|---|--------------------|--|
| 50252700-AR01-00-01 50252700-AR01-0E1-0 Heritage statement Design and access stat | 10 Ground floor plan as proposed 210 Elevations as proposed ement | | | |
| 11. Neighbour and | I Community Consultation | | | |
| | ur neighbours or the local community about the proposal? | · | © Yes | No No |
| 12. Site Visit | | | | |
| | om a public road, public footpath, bridleway or other public | c land? | Yes | © No |
| If the planning authority The agent The applicant Other person | needs to make an appointment to carry out a site visit, w | hom should they contact? | | |
| If Other has been sele | cted, please provide contact details: | | | |
| Contact name: | | | | |
| Title | Mr | | | |
| First name | | | | |
| Surname | | | | |
| Telephone number | | | | |
| Email address | | | | |
| 13. Pre-application Has assistance or prior | n Advice advice been sought from the local authority about this app | pplication? | □ Yes | ⊚ No |
| (a) a member of staff (b) an elected member (c) related to a membe (d) related to an electe It is an important princip For the purposes of this | thority, is the applicant and/or agent one of the follow r of staff d member ble of decision-making that the process is open and transport of the sequestion, "related to" means related, by birth or otherwising considered the facts, would conclude that there was binority. | parent. se, closely enough that a fair-minded and | ○ Yes | ● No |
| 15 Contification | | | | |
| 15. Certificates CERTIFICATE OF OWI Regulations 1990 | NERSHIP - CERTIFICATE B - Certificate under Regulat | tion 6 of the Planning (Listed Buildings | and Co | onservation Areas) |
| the date of this applica | certifies that I have/the applicant has given the requis ation, was the owner (owner is a person with a freehol to which this application relates. | site notice to everyone else (as listed be ld interest or leasehold interest with at | elow) w least 7 | ho, on the day 21 days before years left to run) of any part |
| Owner | | | | |

| Name of Owner Number Suffix House Name Address line 1 Address line 2 Town/city Postcode Date notice served Person role The applicant | 1 Railway Cottages Station Road Perranwell Station Truro TR3 7LQ 24/01/2022 | |
|--|--|--|
| Number Suffix House Name Address line 1 Address line 2 Town/city Postcode Date notice served Person role | Railway Cottages Station Road Perranwell Station Truro TR3 7LQ | |
| Suffix House Name Address line 1 Address line 2 Town/city Postcode Date notice served Person role | Railway Cottages Station Road Perranwell Station Truro TR3 7LQ | |
| House Name Address line 1 Address line 2 Town/city Postcode Date notice served Person role | Station Road Perranwell Station Truro TR3 7LQ | |
| Address line 1 Address line 2 Town/city Postcode Date notice served Person role | Station Road Perranwell Station Truro TR3 7LQ | |
| Address line 2 Town/city Postcode Date notice served Person role | Perranwell Station Truro TR3 7LQ | |
| Town/city Postcode Date notice served Person role | Truro TR3 7LQ | |
| Postcode Date notice served Person role | TR3 7LQ | |
| Date notice served Person role | | |
| Person role | 24/01/2022 | |
| | <u> </u> | |
| ● The agent Title Mr First name Tre Surname Jon Declaration date (DD/MM/YYYY) | evor nes 01/2022 | |
| Declaration made | | |
| 16. Declaration | | |
| I/we hereby apply for planni that, to the best of my/our k | ing permission/consent as described in this form an knowledge, any facts stated are true and accurate a | d the accompanying plans/drawings and additional information. I/we confirm and any opinions given are the genuine opinions of the person(s) giving them. |
| Date (cannot be preapplication) | 01/2022 | |
| | | |
| | | |