

PLANNING & DEVELOPMENT DEPARTMENT

OLD WESLEYAN CHAPEL **GARRISON LANE** ST MARY'S ISLES OF SCILLY TR21 0JD

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Application for Planning Permission. **Town and Country Planning Act 1990**

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply 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.

Please complete using block capitals and black ink.

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

1. Appli	cant Name and Address	2. Agent Nan	ne and Address
Title:	MRS First name: ANGELA	Title:	First name:
Last name	GREENLAW	Last name:	
Company (optional):		Company (optional):	
Unit:	House House suffix:	Unit:	House House suffix:
House name:	OID TOWN CAFE	House name:	
Address 1:	ST. MARYS	Address 1:	
Address 2:		Address 2;	
Address 3:		Address 3:	
Town:	ISLES OF SCILLY	Town:	
County:	CORNWALL	County:	
Country:	ENGLAND	Country:	
Postcode:	TR21 UNH	Postcode:	
Please des	iption of the Proposal cribe the proposed development, including any change of ge of color to the Lower para m to clouded violet.	of use: + cf the Co	afe. Changing from
	lding, work or change of use already started?	Yes N	o
Has the bui			
f Yes, pleas	se state the date when building, e were started (DD/MM/YYYY):	(dat	re must be pre-application submission)

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? Yes No
House name: OLD TOWN CAFE	If Yes, please complete the following information about the advice
Address 1: ST. MARYS	you were given. (This will help the authority to deal with this application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: ISLES OF SCILLY	
County: CURNWACL	Reference:
Postcode (optional): TRZ1 UNH	
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:	
	2
	3 - x
E Dedoctuion and Vahiela Aggest Dende and Dights of Way	(7. Wanta Stangara and Callagian
6. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed	7. Waste Storage and Collection
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	If Yes, please provide details:
the public highway? Yes No	
Are there any new public roads to be provided within the site? Yes V No	
Are there any new public	
rights of way to be provided within or adjacent to the site?	
Do the proposals require any diversions	Llaura awan anta ha an mada
/extinguishments and/or	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:
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff (b) an elected member	Do any of these statements apply to you? Yes No
(c) related to a member of staff	
(d) related to an elected member	
If Yes, please provide details of the name, relationship and role	
Chris I homas,	

MaterialsIf applicable, please sta	ate what materi	als are to be used extern	nally. Include	e type, colour and name for	each material:		
==	Existing (where applic	able)		Proposed		Not applicable	Don't Know
Walls	Paint -	- Crean		Paint - Clove	hed Violet		
Roof						u	
Windows		10				V	
Doors						V	
Boundary treatments (e.g. fences, walls)						V	
Vehicle access and hard-standing						V	
Lighting						V	
Others (please specify)							
Are you supplying add If Yes, please state refe			32)/design and access statem statement:	ent? Yes	V	No
10. Vehicle Parkin	g						
Please provide infor	mation on the	existing and proposed r	number of or	n-site parking spaces:			
Type of Vehicle		Total Existing	Total	Total proposed (including Diffe spaces retained) in s			
Cars							
Light goods vehi public carrier veh	cles/ iicles						
Motorcycles							
Disability space	es						
Cycle spaces							
Other (e.g. Bus	5)						
Other (e.g. Bus	s)	***************************************					

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
	If Yes, you will need to submit a Flood Risk Assessment to consider
Package treatment plant	the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	ls your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
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? Yes No
plant(s)/ Grawning(s).	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14 Evisting Has
13. Biodiversity and deological 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	CAFE
likelihood that any important biodiversity or geological	CALL
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	Is the site currently vacant? Yes No
likelihood of the following being affected adversely or conserved 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?	in rest, predict describe the last disc of the steel
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
₩ No	When did this use end (if known)? 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	Land which is known to be contaminated? Yes No
₩ No	
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	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
No	
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the	Does the proposal involve the need to
proposed development site? Yes No And/or: Are there trees or hedges on land adjacent to the	dispose of trade effluents or waste? 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 V No	
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'.	е

Does your proposal in If Yes, please complet	clude th	ne ga	in, los	s or c	hang	s ion) e of use of e tables be	resider low:	ntial units? Yes	V	No.					
Proposed Housing								Existing Housing							
Market	Not		Num	ber of	Bedr	ooms	Total	Market	Not		Numl	ber of	Bedr	ooms	Total
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknown	
Houses			<u> </u>					Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units	vork units 🔲			Live-work units											
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	T	otals	(a+t) + <i>c</i> +	d+e	+f+g)=			To	otals	(a + t) + <i>c</i> +	d+e	+f+g)=	
		-													
Social Rented	Not		Numl	oer of	Bedr	ooms	Total	Social Rented	Not		Numl	ber of	Bedr	ooms	Total
	known	_1_	2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	To	otals	(a + b	+ C+	d+e	+ f + g) =			To	otals	(a+b) + <i>c</i> +	d+e	+f+g)=	
Intermediate	Not known			umber of Bed			Total	Intermediate	Not			T		ooms	Total
	IKTEDWITE	1	2	3	4+	Unknown		11	known	1	2	3	4+	Unknown	-
Houses					1		- 11							1 ,	l
Houses						 		Houses			-		-	-	
Flats and maisonettes								Flats and maisonettes							
Flats and maisonettes Live-work units								Flats and maisonettes Live-work units							
Flats and maisonettes Live-work units Cluster flats								Flats and maisonettes Live-work units Cluster flats							
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Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios							Takal	Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios							
Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type			Numl	per of	Bedr	ooms	Total	Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios			Numl	per of	Bedr	ooms	Total
Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type	D D D To						Total	Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type	D D D To				Bedr		Total
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Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Key worker Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios	Not known	1	Numk 2 (a + b	per of 3 +c+	Bedr. 4+	ooms Unknown	Total	Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Key worker Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios	Not known	1 otals	Numl 2	0 er of	Bedra 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+ 4+	ooms Unknown	Total

		-		Non-resident in or change of u			pace? Yes	√ No	
If yo	ou have answ	ered Yes to th	ne qu	estion above plea	se add details	in the follow			
	Use class/type of use		Not applicable		Gross interna to be lost by use or der (square r	l floorspace change of molition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	Sł	nops							
		lable area:							
A2	Financial and professional services								
A3		its and cafes							
A4	Drinking es	tablishments							
A5	Hot food	takeaways							
B1 (a)		ner than A2)							
B1 (b)		rch and opment							
B1 (c)		ndustrial							
B2	General	industrial							
B8		distribution							
C1		nd halls of dence							
C2	1	linstitutions							
D1		sidential utions							
D2	Assembly and leisure								
OTHER	1								
Please Specify									
		otal							
In ad	dition, for ho	tels, resident	ial ins	titutions and hos	tels, please add	ditionally inc	dicate the loss or gain of	rooms	
Use class	Type of use	Not applicable	Existi	ng rooms to be lo of use or demo	ost by change Total room ch		is proposed (including langes of use)	Net additional rooms	
C1	Hotels								
C2	Residential Institutions								
OTHER									
Please Specify									
	ployment								
Please co	omplete the	following info		ion regarding em	i i		Tot	al full-time	
				Full-time	Part-	time 		quivalent	
	isting employ								
Pro	posed emplo	byees							
	urs of Ope	_							
Pleas				r each non-reside			Sunday and		
	Use	Mo	nday	to Friday	Saturday	/	Bank Holidays	Not known	
21. Site	e Area								
Please sta	ate the site a	rea in hectare	s (ha)						

22. Industrial or Commercial Proce	sses	and Machin	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	cluding de the				
Is the proposal a waste management develo	pmei	nt? Yes	No			
If the answer is Yes, please complete the foll	*					
	The total cap including engi allowance for tonnes if sol	acity of the void in neering surcharge cover or restorati id waste or litres if	Maximum annual opera throughput in tonno (or litres if liquid was	es		
Inert landfill	Not applicable					
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						
Other developments						
Please provide the maximum annual operati	onal 1	throughput of th	e following waste	streams:		
Municipal						
Construction, demolition and e		tion				
Commercial and industr	ial					
Hazardous			1		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
If this is a landfill application you will need to planning authority should make clear what i	o prov inforn	nation it require	mation before you s on its website.	ur application can	be determined. Your wast	е
23. Hazardous Substances						
Does the proposal involve the use or storage the following materials in the quantities state			No	Not applical	ole	
If Yes, please provide the amount of each sul	ostan	ce that is involve	ed:			
Acrylonitrile (tonnes)	E	thylene oxide (to	onnes)]	Phosgene (tonnes)	
Ammonia (tonnes)	Hydr	ogen cyanide (to	onnes)	Sul	phur dioxide (tonnes)	
Bromine (tonnes)	L	iquid oxygen (to	onnes)		Flour (tonnes)	
Chlorine (tonnes)	quid p	etroleum gas (to	onnes)	Refined	white sugar (tonnes)	
Other:			Other:			
Amount (tonnes):			Amount (ton	ines):		