



**COUNCIL of the  
ISLES OF SCILLY**

PLANNING & DEVELOPMENT DEPARTMENT

P-14-051

OLD WESLEYAN CHAPEL  
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ISLES OF SCILLY  
TR21 0JD

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Application for removal or variation of a condition following grant of planning permission.

Town and Country Planning Act 1990.

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://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. Applicant Name and Address				2. Agent Name and Address			
Title:	Mr	First name:	SEAN	Title:		First name:	
Last name:	PARSONS			Last name:			
Company (optional):	COUNCIL OF THE ISLES OF SCILLY			Company (optional):			
Unit:		House number:		House suffix:		Unit:	
House name:	TOWN HALL			House name:			
Address 1:	ST MARY'S			Address 1:			
Address 2:				Address 2:			
Address 3:				Address 3:			
Town:	HUGH TOWN			Town:			
County:	ISLES OF SCILLY			County:			
Country:				Country:			
Postcode:	TR21 0LW			Postcode:			

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13 OCT 2014

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### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference. (must be completed if postcode is not known):

Easting:  Northing:

Description:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

### 5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

THE CHANGE OF USE OF THE EXISTING BUILDING FROM A WHOLESALERS TO AN INNOVATION + ENTERPRISE CENTRE INCLUDING WORK UNITS.

Reference number:  Date of decision (DD/MM/YYYY):  (date must be pre-application submission)

Please state the condition number(s) to which this application relates:

1.	CONDITION 7	6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Has the development already started?  Yes  No

If Yes, please state when the development started (DD/MM/YYYY):  (date must be pre-application submission)

Has the development been completed?  Yes  No

If Yes, please state when the development was completed (DD/MM/YYYY):  (date must be pre-application submission)

### 6. Condition(s) - Removal

Please state why you wish the condition(s) to be removed or changed:

WE WOULD LIKE TO CHANGE CONDITION 7 AS, FOLLOWING ADVICE FROM BOTH THE CONTRACTOR + THE CLIENT'S DESIGN TEAM IT IS NOT POSSIBLE TO INSTALL A RAIN WATER HARVESTING TANK AS THE PROXIMITY OF THE WATER TABLE TO SURFACE LEVEL WOULD

If you wish the existing condition to be changed, please state how you wish the condition to be varied: CAUSE THE TANK TO AS PER CONDITION 7 BUT OMIT "... AND HARVESTING MEASURES..." FLOAT. TO REMOVE THE OBLIGATION TO PROVIDE RAIN WATER HARVESTING.