

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

Telephone: [01720] 424350 [01720] 424317 Fax: Email: planning@scilly.gov.uk

Application for Planning Permission. Town and Country Planning 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.

1. Applicant Na	ame, Address and Contact Details				
Title: Mr	First name:	Surname:			
Company name	Tregarthen's Hotel Limited				
Street address:	3 Lemon Villas		Country Code	National Number	Extension Number
		Telephone number:			
		Mobile number:			
Town/City	Truro	For number		7	
County:	Cornwall	Fax number:			
Country:	United Kingdom	Email address:			
Postcode:	TR11 2Nx				
Are you an agent a	cting on behalf of the applicant? Yes	○ No			
2. Agent Name	, Address and Contact Details				
Title: Mr	First Name: David	Surname: Sco	ott		
Company name:	Scott & Company				
Street address:	Scott and Company		Country Code	National Number	Extension Number
	3 Lemon Villas	Telephone number:		01872 263939	
		Mobile number:			
Town/City	Truro	Fax number:			
County:	Cornwall	Tax Humber.			
Country:	United Kingdom	Email address:			
Postcode:	TR1 2NX	enquiries@scottandco	-buildingconse	rvation.co.uk	
3. Description	of the Proposal				
Please describe the	proposed development including any change of use:				
Construction of nev	v block to provide hostel accommodation (sui generis) use for staf	f accommodation			
Has the building, w	ork or change of use already started?	No			

4. Site Address	Details			
Full postal address	of the site (includi	ng full postcode where a	vailable)	Description:
House:		Suffix:		Overgrown garden
House name:	Men - a - Vaur			
Street address:	Church Road			
	St. Mary's			
Town/City:	ISLES OF SCILLY			
County:				
Postcode:	TR21 ONA			
Description of locat (must be completed				
Easting:	89516			7
Northing:	14294			=
Worthing.				
5. Pre-applicat	ion Advice			
Has assistance or pr	rior advice been so	ought from the local auth	ority about this applicat	tion?
If Yes, please compl	lete the following	information about the ac	dvice you were given (th	nis will help the authority to deal with this application more efficiently):
Officer name:				
Title:	First name:	Lisa		Surname: Walton
Reference:	Email to So	cott and Co dated 27/05/	15	
Date (DD/MM/YYYY	27/05/201	5 (Must be p	re-application submission	on)
Details of the pre-ap	pplication advice r	eceived:		
carefully. I consider incorporate the self achieving a high qu	that the redevelor catering apartmentality built environ age assets, neighb	opment of an existing C1 ents (which are not techn ment, in terms of design	hotel to a different style ically C1 or C3) as well a and materials, not impa	old off as a separate unit of holiday accommodation will have to be considered of hotel would likely come under a Sui-Generis, mixed use site which could see the other traditional hotel accommodation, and restaurant. Subject to the plans acting detrimentally on other issues of acknowledged importance (historic and other infrastructure etc.) then I would be happy to support the proposal as
6. Pedestrian a	nd Vehicle Ad	cess, Roads and Ri	ghts of Way	
Is a new or altered v	vehicle access pro	posed to or from the pub	lic highway?	Yes No
Is a new or altered p	pedestrian access	proposed to or from the	public highway?	
Are there any new p	oublic roads to be	provided within the site?	? C Ye	s No
Are there any new p	oublic rights of wa	ay to be provided within o	or adjacent to the site?	
	_	ons/extinguishments and	-	way? Yes • No
			<u> </u>	
7. Waste Storag	ge and Collec	tion		
Do the plans incorp	orate areas to sto	re and aid the collection	of waste?	Yes
If Yes, please provid				
Storage in the down	<u> </u>			
_		ne separate storage and c	collection of recyclable w	vaste? Yes No
If Yes, please provide Storage in the down				
8. Authority En		her		
With respect to the (a) a me		20		
(c) relate	ed to a member of ed to an elected m	nember	ou of those state	opplyto you?
		Do ar	ny of these statements a	apply to you? () Yes (• No

9. Materials			
Please state what materials (including type, colour and na	ame) are to be used externally (if appli	cable):	
Walls - description:			
Description of existing materials and finishes:			
n/a			
Description of <i>proposed</i> materials and finishes: Rendered block work			
Roof - description:			
Description of <i>existing</i> materials and finishes:			
n/a			
Description of <i>proposed</i> materials and finishes:			
Natural slate			
Windows - description: Description of <i>existing</i> materials and finishes:			
n/a			
Description of <i>proposed</i> materials and finishes:			
Double glazed plastic uPVC as per neighbouring propertie	es		
Doors - description: Description of <i>existing</i> materials and finishes:			
n/a			
Description of <i>proposed</i> materials and finishes:			
Plastic uPVC with some glazing as per neighbouring prop			
Are you supplying additional information on submitted p	= =	tatement?	• Yes No
If Yes, please state references for the plan(s)/drawing(s)/d S 821	esign and access statement:		
3021			
10. Vehicle Parking			
Please provide information on the existing and proposed	number of on-site parking spaces:		
Type of vehicle	Existing number of spaces	Total proposed (including spaces retained)	Difference in spaces
Cars	1	1	0
Light goods vehicles/public carrier vehicles	0	0	0
Motorcycles	0	0	0
Disability spaces	0	0	0
Cycle spaces	0	0	0
Other (e.g. Bus)	0	0	0
Short description of Other			
11. Foul Sewage			
Please state how foul sewage is to be disposed of:			
Mains sewer	Package treatment plant	Unknown	
		J GIRIOWII	
Septic tank	Cess pit		
Other			
Are you proposing to connect to the existing drainage sys	stem?	No C Unknown	
If Yes, please include the details of the existing system on			
	<u> </u>	3(7	
12. Accessment of Flood Biok			
12. Assessment of Flood Risk			
Is the site within an area at risk of flooding? (Refer to the Eflood zones 2 and 3 and consult Environment Agency star requirements for information as necessary.)			
If Yes, you will need to submit an appropriate flood risk as	ssessment to consider the risk to the p	roposed site.	
Is your proposal within 20 metres of a watercourse (e.g. ri	ver, stream or beck)?		
Will the proposal increase the flood risk elsewhere?			
How will surface water be disposed of?			
Sustainable drainage system	Main sewer	Pond	I/lake
Soakaway	Existing watercourse		
V	Existing watercourse		

13. Biod	liversity and Geological Conserv	ation			
	n answering the following questions refer t ical conservation features may be present c				any important biodiversity
	ferred to the guidance notes, is there a reas djacent to or near the application site:	onable likelihood of the followir	ng being affected adversely o	r conserved and enhanced wi	thin the application site, OR
a) Protecte	ed and priority species				
Yes,	on the development site Ye	es, on land adjacent to or near th	e proposed development	No)
b) Designa	ated sites, important habitats or other biod	versity features			
Yes,	on the development site Y	es, on land adjacent to or near th	e proposed development	No	0
c) Feature	s of geological conservation importance				
Yes,	on the development site Y	es, on land adjacent to or near th	e proposed development	No	0
14. Exis	ting Use				
	scribe the current use of the site:				
Redundan	nt disused garden				
Is the site	currently vacant?	○ No			
If Yes, plea	ase describe the last use of the site:				
Garden					
Does the	this use end (if known) (DD/MM/YYYY)? proposal involve any of the following? will need to submit an appropriate contam	ination assessment with your ar	polication		
	ch is known to be contaminated?	Yes No	phoduori.		
Land whe	re contamination is suspected for all or par	of the site?	Yes No		
	ed use that would be particularly vulnerable		_	'es 🕟 No	
		· 			
15. Tree	es and Hedges				
Ano thous		omt eite?	o No		
	trees or hedges on the proposed developm	~			
	re there trees or hedges on land adjacent to ent or might be important as part of the lo		e that could influence the	Yes No	
•	ither or both of the above, you <u>may</u> need to	•	e discretion of your local plan	ning authority If a Tree Surve	v is required this and the
accompar	nying plan should be submitted alongside y	our application. Your local plant	ning authority should make c	lear on its website what the su	
accordanc	ce with the current 'BS5837: Trees in relation	n to design, demolition and cons	struction - Recommendations	'.	
16 Trac	de Effluent				
io. iiac	ie Emidem				
Does the	proposal involve the need to dispose of trace	de effluents or waste?	C Yes (No	
17. Resi	dential Units				
	proposal include the gain or loss of reside	ntial units?	Yes 🕟 No		
Does your	proposar include the gain or loss of resider	itiai uriits:	163 (110		
18. All T	ypes of Development: Non-resid	lential Floorspace			
Does your	proposal involve the loss, gain or change of	f use of non-residential floorspa	ce?	YesNo	
		Existing gross	Gross	Total gross new internal	Net additional gross
	Use class/type of use	internal	internal floorspace to be lost by change of use or	floorspace proposed	internal floorspace
	Use class/type of use	floorspace (square metres)	demolition	(including changes of use) (square metres)	following development (square metres)
		(square metres)	(square metres)	(square metres)	(square metres)
A1	Shops Net Tradable Area	0.0	0.0	0.0	0.0
A2	Financial and professional services	0.0	0.0	0.0	0.0
A3	Restaurants and cafes	0.0	0.0	0.0	0.0
A4	Drinking estabishments	0.0	0.0	0.0	0.0
A 5	Hot food takeaways	0.0	0.0	0.0	0.0
B1 (a)	Office (other than A2)	0.0	0.0	0.0	0.0
B1 (b)	Research and development	0.0	0.0	0.0	0.0
B1 (c)	Light industrial	0.0	0.0	0.0	0.0

18. All	Types of Deve	elopment	: Non-reside	ential F	loorspace (conti	nued)					
B2	Gen	eral industria	al		0.0		0.0	o l	0.0		0.0
B8	Storage or distribution			0.0		0.0		0.0		0.0	
C1	Hotels and halls of residence			0.0		0.0	D	0.0		0.0	
C2	Residential institutions			0.0		0.0	D	0.0		0.0	
D1	Non-resid	dential instit	utions		0.0		0.0)	0.0		0.0
D2	Assem	nbly and leis	ure		0.0		0.0)	0.0		0.0
Other	Other Please Specify			0.0		0.0	D	93.0		93.0	
		Total			0.0	0.0		D	93.0 93.0		93.0
For hotels	s, residential institu	tions and ho	stels, please ad		y indicate the loss or g						
ι	Jse Class	Туре	es of use	Existing	rooms to be lost by c or demolition	hange of use	Total rooms proposed (including changes of use)			Net additional roc	oms
	Other	Н	ostels		0			12		12	
-	ployment	ne following	information reg		mployees:			Equivalent number o	ffull +	ima	
	Existing employee	55	0	ie	0			0	i iuii-t		
	Proposed employe		0		0			0			
	Mo Start Tir	nday to Frida		or each n	oon-residential use pro Saturo Start Time			Sunday and B Start Time		olidays d Time	Not Known
What is th	ne site area?	784	sq.met	res							
Please des type of ma	ustrial or Comi scribe the activities achinery which ma posal for a waste m	and process y be installe	ses which would d on site:		-	the end prod		g plant, ventilation or ai	r cond	litioning. Please inc	lude the
	ardous Substa		roposal?		○ Yes ● No						
24. Site	Visit										
	nning authority nee		an appointmen		ay or other public land out a site visit, whom on		contact? (Plea	Yes No ase select only one)			
25. Cert	tificates (Certif	ficate B)									
applicatio	he applicant certifi n, was the owner <i>(</i>	es that I have owner is a pe	e/the applicant rson with a freeh	has giver nold intere	n the requisite notice est or leasehold interes	ocedure) (Engle to everyone el t with at least 7	gland) Orde Ise (as listed l 7 <i>years left to</i>	r 2015 Certificate unde pelow) who, on the day 2 run) and/or agricultural t ch this application relate	21 day enant	s before the date of	

	icates (Certificate	B - continued)						
Owner/Agric	cultural Tenant						Date notice	eserved
Name	TREGARTHEN'S HOTEL	L(SCILLY)LIMITED						
Number:		Suffix:	House name:					
Street:	LOWIN HOUSE						00/00/0	
Locality:	TREGOLLS ROAD						08/08/2	2015
Town:	TRURO							
Postcode:	TR1 2NA							
Title: Mr	First name	e: David		Surname:	Scott			
Person role:	Agent	Declaration date:	23/07/2015			Declaratio	n made	
26. Declai	ration							
additional in	formation. I/we confirm	nission/consent as described in h that, to the best of my/our kr hions of the person(s) giving th	nowledge, any facts stated			\boxtimes	Date 14	/08/2015