

COUNCIL of the ISLES OF SCILLY

OLD WESLEYAN CHAPEL GARRISON LANE ST MARY'S ISLES OF SCILLY

P-16-032

TR21 0JD

Telephone: [01720] 424350 Fax:

[01720] 424317 planning@scilly.gov.uk

PLANNING & DEVELOPMENT DEPARTMENT

Householder Application for Planning Permission for works or extension to a dwelling. 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. Applicant Name and Address		2. Agent Name and Address		
Title:	MR First name: 6COFF	Title: First name: ADAM		
Last name:	DOMNEY	Last name: Texchanece		
Company (optional):		Company (optional): BLACKER DULDING-SERVICES		
Unit:	House House suffix:	Unit: House number: House suffix:		
House name:	LUSHERS COTTAGE	House name:		
Address 1:	WHITSBURY	Address 1: MOORWELL LAME		
Address 2:	FORDING-BRIDGE	Address 2: ST MANYS		
Address 3:		Address 3:		
Town:		Town:		
County:	Lean Region hedges need	County: ISLES OF SCILLY		
Country:	arder to carry out your proposal?	Country:		
Postcode:	SPE 3Q8	Postcode: TRZI OJZ		
3 Descri	intion of Proposed Works			

replace existing aluminium frame windows with same size white upoc windows.

RECEIVED BY THE PLANNING DEPARTMENT 1 2 APR 2016

3. Description of Proposed Works (continued)	STATE TO UNION THE	
Has the work already started?	VIIIOZ BO ZB ISH ANTONI	
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)	
Has the work already been completed?	EAST-LIMED IN TO A SHARA IS	
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. Unit: House number: 3 House suffix: House name: Horbour View Address 1: Thorough Fore Address 2: Hural Takes	Is a new or altered vehicle access proposed to or from the public highway? Is a new or altered pedestrian access proposed to or from the public highway? Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes No	
Address 2: Hugh Town Address 3:	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/ drawing(s):	
Town: St. Manys County: Isles of Saily Postcode (optional):	TTO STATE OF THE S	
Has assistance or prior advice been sought from the local authority about this application? 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 possible: Officer name:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:	
Reference: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received:	Will any trees or hedges need to be removed or pruned in order to carry out your proposal? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale.	
8. Parking Will the proposed works affect existing car parking arrangements? Yes No If Yes, please describe:	9. Authority Employee / Member 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 the name, relationship and role	

endar Avitetà 1 c auplicari was tha optication relates is or	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	ling. Ing. Process of process and to run. In section of ties of a	a facet is, or is peri of, an agricultural hado revivold meres or leceshold interest with at k the meaning given by retrience in the "elianti Designed - i	of ded south vines	
902 50 72	53-20	M. H.		
Roof	SMP - CERTIFICATE N codwni (England) Order 2015 Cardificate codwni (England) Order 2015 Cardificate police to everyonk else (at lated plicultural tenent** of any part of the land o	CERTIFICATE OF OWNER Planning (Development Minaquine of Pro- tities that I have the applicant has given the this application, was the owner. and or se-	10 - 23 0	
Windows	Aluminium, Silver	white, upuc	Agriculture / Agriculture / Agriculture /	
Doors				
Boundary treatments (e.g. fences, walls)	Stants.	i bs pkr0	SIMO AGA-	
Vehicle access and hard-standing				
Lighting				
Others (please specify)				
	tional information on submitted plan(s)/dravences for the plan(s)/drawing(s)/design and		Yes	No

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 interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Date (DD/MM/YYYY): Signed - Applicant: 22/03/2016 **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) 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 or building to which this application relates. "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 Name of Owner / Agricultural Tenant Date Notice Served Address

Or signed - Agent:

Signed - Applicant:

Date (DD/MM/YYYY):

Town and Country Planning (Develop I certify/ The applicant certifies that: Neither Certificate A or B can be issue	ERTIFICATE OF OWNERSHIP - CEI benent Management Procedure) (I d for this application to find out the names and addresse but I have/ the applicant has been to easehold interest with at least 7 years	RTIFICATE C England) Order 2015 Certificate under Article 1 es of the other owners* and/or agricultural tenant unable to do so. left to run.	
Name of Owner / Agricultural Tenant	Address	Date Notice S	erved
ala umpel entim mielu mi	Country codes Abut	disnostiqui enumber (uptional): 2	(Fire)
		zlatV o	12 .51
Notice of the application has been published i (circulating in the area where the land is situat	n the following newspaper red):	On the following date (which must not be ea than 21 days before the date of the application	rlier on):
(aliefab a Masalkqis maga 423)	The state of the s	Na baen selected, playsontain pages se co	Cityet
Signed - Applicant:	Or signed - Agent:	Date (DD/MM	/YYYY):
Town and Country Planning (Develop I certify/ The applicant certifies that: Certificate A cannot be issued for this a All reasonable steps have been taken t	application o find out the names and addresses * and/or agricultural tenant** of ar o do so. asehold interest with at least 7 years l	ngland) Order 2015 Certificate under Article 16 sof everyone else who, on the day 21 days before by part of the land to which this application relate left to run.	the
Notice of the application has been published ir (circulating in the area where the land is situate		On the following date (which must not be ea than 21 days before the date of the application	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/	VVVV)·
Jigned Applicant.	or signed Agent.	Date (BB/MM)	
12. Planning Application Requireme	nts - Checklist		
Please read the following checklist to make sur	e you have sent all the information tion being deemed invalid. It will n	in support of your proposal. Failure to submit all ot be considered valid until all information require	ed by
The original and 3 copies of a 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:	The original and 3 copies of a design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to Listed Building:	The correct fee: The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):	

Signed - Applicant:	Or signed - Agent:	in application.	Date (DD/MM/YYYY 24/3/16): (date cannot be pre-application
14. Applicant Contact Details		15. Agent Co	ontact Details	
Telephone numbers		Telephone num	bers	
Country code: National number:	Extension	Country code:	Netteral	Extension number:
Country code: National number:	number:	Country code:	National number:	number:
Country code: Mobile number (optional):		Country code:	Mobile number (optional):	
Country code: Fax number (optional):		Country code:	Fax number (optional):	
	*			0
Email address (optional):		Email address (optional):	
16. Site Visit	9			
Can the site be seen from a public road, public fo	ootpath, bridleway o	r other public land	? Yes No	
If the planning authority needs to make an appo out a site visit, whom should they contact? (<i>Pleas</i>	intment to carry se select only one)	Agent		different from the oplicant's details)
If Other has been selected, please provide:				
Contact name:	10904	Telephone num	ber:	incallent - bengið