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By Tom Anderton at 9:00 am, Apr 09, 2021

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

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



COUNCIL OF THE ISLES OF SCILLY Planning Department Town Hall, The Parade, St Mary's, Isles of Scilly, TR21 0LW 1 01720 424350 1 planning@scilly.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

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

Applicant Name and Address							
Title:	MR	First name: PAUL					
Last name:	Cil	ouês					
Company (optional):							
Unit:		House number: House suffix:					
House name:	10	PSAIL					
Address 1:	Co	STOMS HOUSE					
Address 2:	Lo	WOR STRUIN					
Address 3:	ST	. MARYS					
Town:	151	LES OF SCILLY					
County:	Co	20WML					
Country:	0	K					
Postcode:	T22	1085					

2. Agent Name and Address					
Title:	ML First name: LAU				
Last name:	SIBLEY				
Company (optional):	SIBLEYS CHALLALD SULVEYORS				
Unit:	House number: House suffix:				
House name:					
Address 1:	PORTNERESSA				
Address 2:	ST. MARYS				
Address 3:					
Town:	ISLES OF SCILLY				
County:	COLNWAL				
Country:	UK				
Postcode:	T221 0JQ				

Version 2018

3. Site Address Details	4. Pre-application Advice			
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?			
Unit: House number: House suffix:	V 163			
House name: INE CUSTOMS HOUSE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: LOWER STELLS	application more efficiently). Please tick if the full contact details are not			
Address 2:	known, and then complete as much as possible:			
Address 3: ST. MARYS	Officer name:			
Town: 18ces OF Scilly	Reference:			
County: Columni	No for this control of the first of the firs			
Postcode (optional): 1221 OPS	Date (DD/MM/YYYY):			
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?			
Easting: Northing:	E-MAIL COLLISTON DEUCE			
Description:				
E Description Of Vour Proposal				
5. Description Of Your Proposal Please provide a description of the approved development as shown	n on the decision letter, including the application reference number			
and date of decision in the sections below:				
TRANSFOR OF USER RESPRICTION F				
	HOPSAIL", TO THE APAREMENT ROLL			
AS "SPINNAKEL", LEAVING TOPSAL	LUNFEREND,			
	/data must be ave application			
Reference number: P/13/031 Date of decision (I	DD/MM/YYYY): 64/66 (2013 (date must be pre-application submission)			
Please state the condition number(s) to which this application relate	es:			
1. CONDITION 4	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 change	ed:			
THE OWNERS OF THE CUSTOMS HOUSE.				
MISSIE BAST & WISH TO OCCUPY "	TOPSAIL" ASTHOR MAIN RESIDENCY.			
If you wish the existing condition to be changed, please state how you wish the condition to be varied:				
TRAUSFOR THE USER RESIDENCE DETHUS				
	TOPSAL UN FENTALUS & AVMINSU FOL			

7. 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. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 2021 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 Address **Date Notice Served**

7 Ownership Cartificates and A	ariaultural I	and Daglaration (ac-	inuad)	
 7. Ownership Certificates and A Town and Country Planning (Delectify) The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been the land or building, or of a part "owner" is a person with a freehold interest "agricultural tenant" has the meaning grant than the steps taken was: 	CERTIFICAT velopment Mar issued for this a taken to find out of it, but I have/ st or leasehold in	TE OF OWNERSHIP - CERTING Agement Procedure) (Engine pplication the names and addresses of the applicant has been unaterest with at least 7 years least 19	IFICATE C gland) Order 2015 Certificate of the other owners* and/or ago able to do so. ft to run.	
The steps taken were:				
Name of Owner / Agricultural Tenant		Address		Date Notice Served
3				
Notice of the application has been publi (circulating in the area where the land is	shed in the follo situated):	wing newspaper	On the following date (which than 21 days before the date	n must not be earlier of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
Town and Country Planning (Deed I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the chave/ the applicant has been und ""owner" is a person with a freehold interest "agricultural tenant" has the meaning gifthe steps taken were:	r this application aken to find out owner* and/or a able to do so. at or leasehold into the control of the cont	the names and addresses o agricultural tenant** of any terest with at least 7 years lef	gland) Order 2015 Certificate f everyone else who, on the da part of the land to which this a ttorun.	y 21 days before the
Notice of the application has been publis	shed in the follow	wing newspaper	On the following date (which	n must not be earlier
(circulating in the area where the land is	situated):		than 21 days before the date	
Signed Applicant:		Orsigned Agent		Data (DD/MM//////)
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):

8. Planning Application Requirement	THE RESIDENCE OF THE PARTY OF T						
Please read the following checklist to make sure information required will result in your applicati the Local Planning Authority (LPA) has been sub	you have sent all the i	nformation in support of your propo lid. It will not be considered valid ur	osal. Failure to submit all ntil all information required by				
The original and 3 copies* of a completed and dated application form:		The original and 3 copies* of the C Ownership Certificate (A, B, C or D) – as applicable)				
The original and 3 copies* of other plans and dra information necessary to describe the subject of	awings or the application:	and Article 14 Certificate (Agricult	tural Holdings):				
The correct fee:							
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.							
9. Declaration							
I/we hereby apply for planning permission/consinformation. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.	ent as described in this /our knowledge, any fa	form and the accompanying plans/ acts stated are true and accurate and	drawings and additional I any opinions given are the				
Signed - Applicant:	Or signed - Agent:	Date (D	D/MM/YYYY):				
		051	0 4 2021 (date cannot be pre-application)				
10. Applicant Contact Details		11. Agent Contact Details					
Telephone numbers		Telephone numbers					
Country and	F-1						
	Extension	0	Extension				
Country code: National number:	number:	Country code: National number:	Extension number:				
		Country code: National number:					
Country code: National number: Country code: Mobile number (optional):		Country code: National number:					
Country code: Mobile number (optional):		Country code: National number:					
		Country code: National number:					
Country code: Mobile number (optional): Country code: Fax number (optional):		Country code: National number:					
Country code: Mobile number (optional):		Country code: National number:					
Country code: Mobile number (optional): Country code: Fax number (optional):		Country code: National number:					
Country code: Mobile number (optional): Country code: Fax number (optional):		Country code: National number:					
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	number:						
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Ta. Site Visit Can the site be seen from a public road, public for lf the planning authority needs to make an appoint a site visit, whom should they contact? (Please)	otpath, bridleway or o		No Other (if different from the				
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 12. Site Visit Can the site be seen from a public road, public for lifthe planning authority needs to make an appoint a site visit, whom should they contact? (Pleas If Other has been selected, please provide:	otpath, bridleway or o	ther public land? Yes	number:				
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Ta. Site Visit Can the site be seen from a public road, public for lf the planning authority needs to make an appoint a site visit, whom should they contact? (Please)	otpath, bridleway or o	ther public land? Yes	No Other (if different from the				
Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 12. Site Visit Can the site be seen from a public road, public for lift the planning authority needs to make an appoint a site visit, whom should they contact? (Pleas If Other has been selected, please provide:	otpath, bridleway or o	ther public land? Yes	No Other (if different from the				