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Application for a Lawful Development By A King at 9:59 am, May 19, 2021 or operation or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure)
(England) Order 2015

## 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 and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

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

0 01720 424350

ISLES OF SCILLY 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

1. Applicant Name and Address						
Title:	Mr First name: Kevin					
Last name:	Sherris					
Company (optional):						
Unit:	House House suffix:					
House name:	Penhallow					
Address 1:	Pilots Retreat					
Address 2:						
Address 3:						
Town:	St Mary's					
County:	Isles of Scilly					
Country:						
Postcode:	TR21 0PB					

2. Agent	Name and Address						
Tit <b>l</b> e:	First name:						
Last name:							
Company (optional):	Stephens Scown LLP						
Unit:	House number: House suffix:						
House name:	Osprey House						
Address 1:	Malpas Road						
Address 2:							
Address 3:							
Town:	Truro						
County:	Cornwall						
Country:							
Postcode:	TR1 1UT						

Version 2018.1

3. Site Address Details					4. Pre-application Advice							
Please provide the full postal address of the application site.  Unit: House House House												
		suffix:		]				X Yes	∐ No			
House name: Penhallow				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								
Address 1: Pilots Retreat												
				known, and	l then comp	lete as mucl	n as possi	ble:				
Town: St Mary's												
County: Isles of Scilly												
TR21 0PI	3				Date (	DD/MM/YY	,					
of location o	r a grid re ostcode is	 ference. not known):		11'								
Easting: Northing:					CLEUD to be submitted - s106 to tie occupation by							
1:				⊒       propriet ⊒	ors if CLE	:UD succ	esstul					
Develonn	nent Ce	rtificate - Interest In	Land									
-			Lana	•								
Yes	No	Lessee:	Yes	s No		Occupier	: X Y	'es [	No			
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			state whether th				, O. Lins a	-				
Name							Hav	e they be	en informed			
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the above, p	lease give	name and address of an	yone yo	Address	s an interest	in the land	Hav in wr	e they be iting of th	en informed ne application			
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	Penhallor Pilots Red St Mary's Isles of Sompleted if portion of pompleted if portion of the applicant Yes	Penhallow Pilots Retreat  St Mary's Isles of Scilly TR21 OPB of location or a grid reempleted if postcode is empleted if postcode is empleted. If postcode is empleted if postcode is empleted if postcode is empleted. If postcode is empleted if postcode is emple	House number: House suffix:  Penhallow  Pilots Retreat  St Mary's  Isles of Scilly  TR21 OPB of location or a grid reference. Impleted if postcode is not known):  Northing:  St Development Certificate - Interest Interes	House number: House suffix:  Penhallow  Pilots Retreat  St Mary's  Isles of Scilly  TR21 0PB  of location or a grid reference. Impleted if postcode is not known):  Northing:  Northing:  The applicant's interest in the land:  Yes No Lessee: Ye	House number: House suffix: If Yes, pleasy you were gapplication Please tick is known, and Officer nam Lisa Wa Reference:  Isles of Scilly  TR21 OPB of location or a grid reference. mpleted if postcode is not known):  Northing: Northing:  Development Certificate - Interest In Land the applicant's interest in the land:  Yes No Lessee: Yes No	Has assistance or prior authority about this application site.    House   House   Suffix:   If Yes, please complete you were given. (This wapplication more efficiency please tick if the full contained in the complete of location or a grid reference. Isles of Scilly    Northing:   Northing:   Northing:   Northing:   Development Certificate - Interest In Land the applicant's interest in the land:   Yes   No   No   No   No   No   No   No   N	House   House   House   Suffix:   Has assistance or prior advice been authority about this application?	de the full postal address of the application site.  House number:	de the full postal address of the application site.  House number: House suffix: If Yes, please complete the following information abo you were given. (This will help the authority to deal w application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:  Officer name:  Lisa Walton and Andrew King  Reference:  MS Teams telcon  Date (DD/MM/YYYY): (must be pre-application submission)  Details of pre-application advice received?  CLEUD to be submitted - \$106 to tie occiproprietors if CLEUD successful  Development Certificate - Interest In Land the applicant's interest in the land:			

6. Authority Employee / Member It is an important principle of decision-making that the process is operated, by birth or otherwise, closely enough that a fair-mind		
conclude that there was bias on the part of the decision-maker in the		
Do any of the following statements apply to you and/or agent?	Yes X No	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 their name, role and how you are rela	ated to them	
7. Description of Use, Building Works or Activity	8. Description	of Existing Use, Building Works or Activity
Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):  An existing use:    X   Yes   No	What is the existing lawfulness is bein	ng site use(s) for which the certificate of g sought? Please fully describe each use and f the land the use relates to:
Existing boliding works.	Use as a gue	striouse
An existing use, building work or activity in breach of a condition:		
Being a use, building works or activity which is still going on at the date of this application  If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to:  C1 guesthouse		
9. Grounds For Application For A Lawful Developmen	it Certificate	
Please state under what grounds is the certificate sought (you must t	tick at least one box):	
X The use began more than 10 years before the date of this application.	cation	
The use, building works or activity in breach of condition began	•	• •
The use began within the last 10 years, as a result of a change change of use requiring planning permission in the last 10 years.  The building works (for instance, building or engineering works of this application.	S.	
The use as a single dwelling house began more than four years	before the date of thi	s application.
Other - please specify (this might include claims that the change from planning permission granted under the Act or by the General If the certificate is sought on 'Other' grounds please give details:	ge of use or building eral Permitted Develo	work was not development, or that it benefited pment Order).
If applicable, please give the reference number of any existing plant notice affecting the application site. Include its date and the numb	ning permission, lawfo er of any condition be	ul development certificate or enforcement eing breached:
Reference Condition Number:	Date (DD/MM/	YYYY):
Please state why a Lawful Development Certificate should be grante	· ·	pplication submission)
See attached Statement	,	

10. Information In Support Of A Lawful Development Certificate	
When was the use or activity begun, or the building works substantially completed:  O1/06/2010  (date must be pre-application submission) (DD/MM/YYYY)	
In the case of an existing use or activity in breach of conditions has there been any interruption?  Yes  No	ı
If Yes, please provide details of the dates, duration and any discontinuance of the development which is the subject of this application your application is based on the claim that a use or activity has been ongoing for a period of years, please state exactly when interruption occurred:	on. If any
In the case of an existing use of land, has there been any material change of use of the land since the start of the use for which a certificate is sought?  If Yes please provide details?	

	Propo	osed H	Housi	ng				Exist	ing H	ousir	ıg		
		Numl	oer of E	Bedroo	ms	Total	1		Numl	per of E	Bedroo	ms	Tota
	1	2	3	4+	Unknown			1	2	3	4+	Unknown	
Market Housing							Market Housing						
Houses	1					а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						g	Unknown						g
Market Hou	using To	otal (a	+ b + c	+ d + e	+ f + g) =	Α	Market Hou	sing T	otal (a	+ b + c	+ d + e	e + f + g) =	E
Social Rented Housing	1	2	3	4+	Unknown		Social Rented Housing	1	2	3	4+	Unknown	
Houses						а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
Cluster Flats						d	Cluster Flats						d
Sheltered Housing						е	Sheltered Housing						е
Bedsit/Studios						f	Bedsit/Studios						f
Unknown						g	Unknown						g
Social Rented Hou	ising To	tal (a	+ b + c	+ d + e	+ f + g) =	В	Social Rented Hou	sing T	otal (a	+ b + c	+ d + e	e + f + g) =	F
Intermediate Housing	1	2	3	4+	Unknown		Intermediate Housing	1	2	3	4+	Unknown	
Houses						а	Houses						а
Flats & Maisonettes						b	Flats & Maisonettes						b
Live-Work Units						С	Live-Work Units						С
						d	Cluster Flats						d
Cluster Flats													е
Cluster Flats Sheltered Housing			:			е	Sheltered Housing						
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Sheltered Housing													f g
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the Local Planning Authority (LPA) has been submitted.	the information in support of your proposal. Failure to submit all invalid. It will not be considered valid until all information required by with the applicant and therefore sufficient and precise information						
The original and 3 copies* of a completed dated application form:	The original and 3 copies* of such evidence verifying the information included in the application as you can provide:						
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 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.							
	ed in this form and the accompanying plans/drawings and additional any facts stated are true and accurate and any opinions given are the  Or signed - Agent						
	C TOFTS for Stephens Scown LLP						
Date (DD/MM/YYYY):  14/05/2021 (date cannot be pre-application submission warning)  WARNING: The amended section 194 of the 1990 Act provides that it is an offeinformation with intent to deceive. Section 193(7) enables the autresult of such false or misleading information.	ion) ence to furnish false or misleading information or to withhold material thority to revoke, at any time, a certificate they may have issued as a						
13. Applicant Contact Details	14. Agent Contact Details						
Telephone numbers	Telephone numbers						
Country code: National number: Extension number:	Country code: National number: Extension number:						
Country code: Mobile number (optional):	Country code: Mobile number (optional):						
Country code: Fax number (optional):	Country code: Fax number (optional):						
Email address (optional):	Email address (optional):  planning@stephens-scown.co.uk						
15. Site Visit							
Can the site be seen from a public road, public footpath, bridleway	y or other public land? 🗶 Yes 🔲 No						
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	X Agent Applicant Other (if different from the agent/applicant's details)						
lf Other has been selected, please provide: Contact name:	Tolonhono numbor:						
C Tofts	Telephone number:						
U TUILS							

Email address:

planning@stephens-scown.co.uk