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Please complete this form in block capitals using black ink to facil

By A King at 11:05 am, Nov 04, 2021

You are advised to read the accompanying guidance notes and per-question help text.

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

## **Application for Planning Permission**

Town and Country Planning Act 1990 (as amended)

## **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, St Mary's, Isles of Scilly, TR21 0LW

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### **Publication on Local 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.

1. Applicant Name and Address							
Title:	First name: Nicola						
Last name:	Stinson						
Company (optional):	Council of the Isles of Scilly						
Unit:	House number: House suffix:						
House name:							
Address 1:	Town Hall						
Address 2:	St Marys						
Address 3:							
Town:	Isles of Scilly						
County:	Isles of Scilly						
Country:	England						
Postcode:	TR210LW						

2. Agent N	lame and Address
Title:	First name:
Last name:	
Company (optional):	
Unit:	House House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

3. Description of the Proposal							
Please describe the proposed development, including any change of use:							
Change of use from single residential dwelling with an	nnex, to 3 self-contained affordable homes.						
Has the building, work or change of use already started?	Yes X No						
If Yes, please state the date when building, work or use were started (DD/MM/YYYY):	(date must be pre-application submission)						
Has the building, work or change of use been completed?	Yes No						
If Yes, please state the date when the building, work or change of use was completed (DD/MM/YYYY):	(date must be pre-application submission)						
Reference number of permission in principle being relied on (technical details consent applications only):							
Is the proposal for public service infrastructure development (within the meaning of article 2 of S.I. 2015/595 as amended by article 3 of S.I. 746/2021)?	Yes X No						
4. Site Address Details	5. Pre-application Advice						
Please provide the full postal address of the application site.  Unit: House humber: House suffix:	Has assistance or prior advice been sought from the local authority about this application?  X Yes No						
House name: April Cottage	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this						
Address 1: Church Road	application more efficiently). Please tick if the full contact details are not						
Address 2: St. Marys	known, and then complete as much as possible:						
Address 3:	Officer name: Lisa Walton						
Town: Isles of Scilly	Reference:						
Postcode TR21 0NA							
(optional): TRZ FUNA  Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)  Sept 2021						
Easting: Northing:	Details of pre-application advice received?						
Description:	in principle discussion on use for affordable homes						

6. Pedestrian and Vehicle Access, Road	ds and Righ	ts of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed	•	•	Do the plans incorporate areas to store
to or from the public highway?	Yes	x No	and aid the collection of waste?  X Yes  No
Is a new or altered pedestrian			If Yes, please provide details:
access proposed to or from the public highway?	Yes	□No	Otanana fan hina and manualina within auntilana af tha
, , ,	res		Storage for bins and recycling within curtilage of the property
Are there any new public roads to be provided within the site?	Yes	∏x No	property
Are there any new public			
rights of way to be provided			
within or adjacent to the site?	Yes	X No	
Do the proposals require any diversions			Have arrangements been made
/extinguishments and/or	Yes	□v No	for the separate storage and
creation of rights of way?	res	x No	collection of recyclable waste?
If you answered Yes to any of the above que	estions, pleas	se show	If Yes, please provide details:
details on your plans/drawings and state the (s)/drawings(s)	e reference o	of the plan	As your Council weeks called then for democratic ways artis
			As per Council waste collection for domestic propertie
8. Authority Employee / Member	41 41		on and two accounts Fourth and account of this according "maletacker"
			en and transparent. For the purposes of this question, "related to" ed and informed observer, having considered the facts, would
conclude that there was bias on the part of t	_		
Do any of the following statements apply to	you and/or	agent? X	Yes No With respect to the authority, I am:
, , , , , , , , , , , , , , , , , , , ,		<b>у</b> П	(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, r	ole and how	you are rela	ited to them.
This is an application for planning	permission	by the Co	uncil of the Isles of Scilly

9. Materials f applicable, please state what materials are to be used externally. Include type, colour and name for each material:									
	Existing (where applicable)			Proposed		Not applicable	Don't Know		
Walls	Render								
Roof	artificial slate								
Windows	upvc								
Doors	upvc								
Boundary treatments (e.g. fences, walls)	stone wall to all other bou	front, timber fe indaries	ncing to	Timber fence -need to g to make the site secure	ate off the driveway				
Vehicle access and hard-standing	tarmac								
Lighting						х			
Others (please specify)									
		•		)/design and access stateme	nt? Yes		No		
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:									
10. Vehicle Parkin									
Please provide information on the existing and proposed num  Type of Vehicle  Total  Existing				n-site parking spaces:  I proposed (including spaces retained)	Difference				
Cars	2	Existing	2	spaces retained/	in spaces				
Light goods vehi public carrier veh	icles/ nicles								
Motorcycles	;								
Disability spac	es								
Cycle spaces	5								
Other (e.g. Bu	s)								

Other (e.g. Bus)

11. Foul Sewage	12. Assessment of Flood Risk					
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the					
X Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)					
Septic tank Other	Yes X No					
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.					
Are you proposing to connect to the existing drainage system?	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No					
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes No					
Use of existing on site connections to mains	How will surface water be disposed of?					
Need to split into 3 supplies	Sustainable drainage system Existing watercourse					
	Soakaway Pond/lake					
	X Main sewer					
(12. Big diversity and Coolegist Consequention	(14 Fulation Has					
13. Biodiversity and Geological Conservation	<b>14. Existing Use</b> Please describe the current use of the site:					
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable	4 bedroomed home previously used as guest house, 2					
likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	bed annex previously used as managers accommodation					
they are likely to be affected by your proposals. Having referred to the guidance notes, is there a reasonable						
likelihood of the following being affected adversely or conserved	Is the site currently vacant? X Yes No					
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the site:					
	as above					
a) Protected and priority species:  Yes, on the development site	<b> </b>					
Yes, on land adjacent to or near the proposed development						
X No	When did this use end (if known)?  DD/MM/YYYY  OALGATOR					
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)					
features:  Yes, on the development site	Does the proposal involve any of the following?  If yes, you will need to submit an appropriate contamination					
Yes, on land adjacent to or near the proposed development	assessment with your application.					
x No	Land which is known to be contaminated? Yes X No					
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?  Yes  X No					
Yes, on the development site	A proposed use that would					
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?  Yes  X No					
<u>k</u> No						
15. Trees and Hedges	16. Trade Effluent					
Are there trees or hedges on the proposed development site?	Does the proposal involve the need to dispose of trade effluents or waste?  Yes  X No					
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal					
proposed development site that could influence the development or might be important as part	of trade effluents or waste					
of the local landscape character?  If Yes to either or both of the above, you may need to provide a full	1					
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be	1					
submitted alongside your application. Your local planning authority should make clear on its website what the survey should	1					
contain, in accordance with the current 'BS5837: Trees in relation to						

	Propos	ed F	lous	ing					Existi	ng	Hous	ing			
Market	Not		Numl		Bedr	ooms	Total	Market	Not		Numl		_	_	Tota
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	_	Unknown	-
Houses	$\perp \sqcup$		3				а	Houses			-		1		1
Flats/maisonettes				-			Ь	Flats/maisonettes	$\perp \sqcup$		-				b
Sheltered housing							С	Sheltered housing			-				C
Bedsit/studios				-			d	Bedsit/studios							d
Cluster flats							е	Cluster flats			-				е
Other							Ŧ	Other							f
		Tot	als (a	+ b +	c + d	+e+f)=	A			То	tals (d	ı + b +	- c + d	+e+f)=	F
Social, Affordable	Not	į	Numl	oer of	Bedr	ooms	Total	Social, Affordable	Not		Numl	oer of	Bedr	ooms	Total
or Intermediate Rent	known	1	2	3	4+	Unknown		or Intermediate Rent	known	1	2	3	4+	Unknown	
Houses							а	Houses							a
Flats/maisonettes		1	2				3	Flats/maisonettes							ь
Sheltered housing							c	Sheltered housing			1				c
Bedsit/studios							d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other			1				f
and the second s		Tot	als (a	+ b +	c + d	+ e + f) =	В		.10 -175	То	tals (a	1+ b+	- c + d	+e+f)=	G
Affordable Home	Not		Numb	per of	Bedr	ooms	Total	Affordable Home	Not Number of Bedrooms			ooms	Total		
Ownership	known	1	2	3	4+	Unknown	_	Ownership	known	1	2	3	_	Unknown	_
Houses							а	Houses							a
Flats/maisonettes							ь	Flats/maisonettes							ь
Sheltered housing							C	Sheltered housing							C
Bedsit/studios						8	d	Bedsit/studios							d
Cluster flats							е	Cluster flats							е
Other							f	Other							f
		Tot	als (a	+ b +	c + d	+e+f)=	C			То	tals (d	ı + b +	- c + d	+e+f)=	Н
2	Not	1	Numl	oer of	Bedr	ooms	Total		Not		Numl	oer of	Bedr	ooms	Total
Starter Homes	known	1	2	3	4+	Unknown		Starter Homes	known	1	2	3	4+	Unknown	
Houses							а	Houses				,			а
Flats/maisonettes				1			ь	Flats/maisonettes							Ь
Bedsit/studios							C	Bedsit/studios							C
Other				1		į.	d	Other							d
			То	tals (	'a + b	+c+d)=	D				To	tals (	(a + b	+c+d)=	1
Self Build and	Not		Numl	oer of	Bedr	ooms	Total	Self Build and	Not		Numl	oer of	Bedr	ooms	Total
Custom Build	known	1	2	3	4+	Unknown		Custom Build	known	1	2	3	4+	Unknown	
Houses			,				а	Houses							а
Flats/maisonettes							ь	Flats/maisonettes							ь
						2	C	Bedsit/studios							C
Bedsit/studios	2.3			l			5000	O41 ::							d
Bedsit/studios Other							d	Other							CI

		1212 On 120 <del>4</del> 6		<b>Non-resident</b> in or change of u			pace? Yes	x No
If you	ı have answe	ered Yes to th	ne que	estion above plea	ase add details	in the follow		
Us	Use class/type of use			Existing gross internal floorspace (square metres)	Gross internal to be lost by use or den (square n	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Sh	ops						
	Net trada	able area:						
A2	profession	cial and nal services						
A3	Restaurant	s and cafes						
A4	Drinking est	tablishments						
A5	Hot food	takeaways						
B1 (a)		er than A2)						
B1 (b)		rch and opment						
B1 (c)		dustrial						
B2	General	industrial						
B8	Storage or	distribution						
C1		nd halls of lence						
C2		institutions						
D1		sidential utions						
D2		and leisure						
OTHER								
Please Specify								
эреспу	Тс	otal						
In add	l dition, for ho	tels, resident	tial ins	titutions and ho	stels, please ad	ditionally inc	licate the loss or gain of	rooms
Usa	Type of use	Not applicable		ng rooms to be l	ost by change	Total room	s proposed (including anges of use)	Net additional rooms
C1	Hotels							
	Residential Institutions							
OTHER	Institutions							
Please Specify								
	ployment							
Please co	mplete the	following inf	ormat	tion regarding en	nployees:	I/A	7	
				Full-time	Part-	time		tal full-time equivalent
Exi	Existing employees							
Pro	posed emplo	yees						
20. Ho	urs of Ope	ning					ac. 100 may 1	
If known	, please state	the hours o	f oper	ning (e.g. 15:30) f	or each non-re	sidential use	· · · · · · · · · · · · · · · · · · ·	
	Use	M	onday	to Friday	Saturda	у	Sunday and Bank Holidays	Not known
21. Site	Area	<del></del> _		<u> </u>		<del></del> _		

0.0494

Please state the site area in hectares (ha)

22. Industrial or Commercial Processes and Machinery								
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:								
Is the proposal a waste management develo	Is the proposal a waste management development? Yes X No							
If the answer is Yes, please complete the foll	owing	g table:	_					
	Not applicable	including engin allowance for	city of the void in eering surcharge cover or restoration d waste or litres if	and making on material (c	throughput in tonnes			
Inert landfill								
Non-hazardous landfill								
Hazardous landfill								
Energy from waste incineration								
Other incineration								
Landfill gas generation plant								
Pyrolysis/gasification								
Metal recycling site								
Transfer stations								
Material recovery/recycling facilities (MRFs)								
Household civic amenity sites								
Open windrow composting								
In-vessel composting								
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment								
Recycling facilities construction, demolition and excavation waste								
Storage of waste								
Other waste management								
Other developments								
Please provide the maximum annual operati	ional	throughput of the	e following waste	streams:				
Municipal								
Construction, demolition and e		ation						
Commercial and industr	rial							
Hazardous  If this is a landfill application you will need t	o pro	vida furthar infar	nation before you	ır application	a can be determined. Your waste			
planning authority should make clear what	inforr	nation it requires	on its website.	и аррисацы	real be determined. Tour waste			
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities stat			x No	☐ Not app	plicable			
If Yes, please provide the amount of each su		201 : 500 Th The Color						
Acrylonitrile (tonnes)		thylene oxide (to			Phosgene (tonnes)			
Ammonia (tonnes)	Hydr	ogen cyanide (to	nnes)	]	Sulphur dioxide (tonnes)			
Bromine (tonnes)	l	iquid oxygen (to	nnes)	]	Flour (tonnes)			
Chlorine (tonnes)	quid p	etroleum gas (to	nnes)	Ref	fined white sugar (tonnes)			
Other:			Other:					
Amount (tonnes):			Amount (ton	nes):				

## 24. 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\*\*

is part of, an agricultural holding**	g to which the application relates, and that holle of the land	a to which the application relates is, or
NOTE: You should sign Certificate B, C application relates but the land is, or i	or D, as appropriate, if you are the sole owner of the lar spart of, an agricultural holding.	nd or building to which the
	st or leasehold interest with at least 7 years left to run. given by reference to the definition of "agricultural tenant" in s	ection 65(8) of the Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
I certify/ The applicant certifies that I ha 21 days before the date of this applicati application relates. * "owner" is a person with a freehold intere	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 20 ve/the applicant has given the requisite notice to everyone on, was the owner* and/or agricultural tenant** of any past or leasehold interest with at least 7 years left to run. Even in section 65(8) of the Town and Country Planning Act 195	e else (as listed below) who, on the da art of the land or building to which thi
Name of Owner / Agricultural Tenant	Address	Date Notice Served
		02/11/21
		02/11/21
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)

# 24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners\* and/or agricultural tenants\*\* of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. frowner" 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 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served** Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else 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 to which this application relates, but I have/ the applicant has been unable to do so.

"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

The steps taken were:	given in section 65(8) of the Town and Count	ry Planning Act 1990
Notice of the application has been pu (circulating in the area where the land		On the following date (which must not be earlier than 21 days before the date of the application):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/VVVV)
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

25. Planning Application Requirements - Checklist								
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by							
The original and 3 copies* of a completed and dated application form:	The correct fee:							
The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale	The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):							
and showing the direction of North:	The original and 3 copies* of a fire statement, if required (see help text and guidance notes for details):							
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 the completed, dated Ownership Certificate (A, B, C or D – as applicable)  and Article 14 Certificate (Agricultural Holdings):							
*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.								
Plans can be bought from one of the Planning Portal's accredited su	ppliers: https://www.planningportal.co.uk/buyaplanningmap							
26. Declaration  I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.  Signed - Applicant:  Nicola Stinson  Or signed - Agent:	Date (DD/MM/YYYY):  O2/11/21  (date cannot be pre-application)							
27. Applicant Contact Details	28. Agent Contact Details							
Telephone numbers	Telephone numbers							
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  nicola.stinson@scilly.gov.u	Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):							
29. Site Visit								
Can the site be seen from a public road, public footpath, bridleway or	r other public land?							
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent Applicant X Other (if different from the agent/applicant's details)							
If Other has been selected, please provide:	•							
Contact name:	Telephone number:							
Email address:								