

RECEIVED

By Liv Rickman at 4:13 pm, Mar 10, 2025

Application for listed building consent for alterations, extension or demolition of a listed building. 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 nformation 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.

Jpon 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 OLW
\$\text{\$01720 424455}\$\$\$
\$\text{\$\text{\$\text{\$^{\text{201720 424455}}}}\$\$\$
\$\text{\$\text{\$^{\text{\$^{\text{\$^{2}}}}}} = \text{\$\text{\$^{\text{\$^{\text{\$^{2}}}}}} = \text{\$\text{\$^{\text{\$^{\text{\$^{2}}}}}} = \text{\$\text{\$^{\text{\$^{\text{\$^{2}}}}}} = \text{\$\text{\$^{\text{\$^{\text{\$^{\text{\$^{2}}}}}}}} = \text{\$\text{\$^{\circ }}}}}}}}}}}}}}}}}}}}}}}}}}}

Publication of applications on planning authority websites

nformation 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.

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

t 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			2. Age
Title:	MR+MRS	First name: NIC + SUE	Title:
Last name:	M	URRAY	Last nam
Company (optional):			Compan (optiona
Unit:	1 1 .	House House suffix:	Unit:
House name:	NORT	H FARM	House name:
Address 1:	HIGE	FRTOWN	Address
Address 2:	ST. 1	MARTINS	Address
Address 3:			Address
Town:			Town:
County:	ISLES	OF SCILLY	County:
Country:	U		Country:
Postcode:	TR25	DQL	Postcode

2. Agent Nam	ne and Address	
Title:	First name:	
Last name:		
Company (optional):		
Unit:	House number:	House suffix:
House name:		
Address 1:		
Address 2:		
Address 3:		
Town:		
County:		
Country:	A SECTION OF THE SECT	
Postcode:		

	n or Proposed work the proposals to alter, extend or demolish the listed building(s):	
R	REMOVE ROTTEN SINGLE GLAZED WINDOW O END WALL ATEAST, OVERLOOKING WATER TANK (DISUSED)	
A	IND REPLACE WITH MATCHING PINE FRAMED	
Wi	INDOW WITH DOUBLE GLAZED PANELS	
i dan se li		
las the work alrea	ady started without consent? Yes No	
f Yes, please state	e when the work was started (DD/MM/YYYY):	
	(date must be pre-application submission)	
las the work been	n completed without consent? Yes No	
	the date when the work was completed (DD/MM/YYYY):	
	(date must be pre-application submission)	
4. Site Addres		
	e full postal address of the application site.	
Unit:	House House	
House	NORTH FARM	
name: Address 1:		
	HIGHERTOWN	
Address 2:	ST. MARTIN'S	
Address 3:		
Town:		
County:	ISLES OF SCILLY	
Postcode (optional):	TR25 OQL	
Description of local	ration or a grid reference. ted if postcode is not known):	
asting:		
Description:	Northing:	

5. Kelated Proposals		o. Pre-application Advice			
Are there any current applications, previous proposals or demolitions for the site?	No	Has assistance or prior advice been sought from the local authority about this application? Yes No			
If Yes please describe and include the planning appreference number(s), if known:	olication	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Description	Reference number	application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:			
x					
		BUILDING GNSENT FOR			
		INCLUSION OF DOUBLE GLAZED GLASS			
		SECTIONS.			
		NO SPECIFIC CONCERNS RAISED.			
	1)(
7. Neighbour and Community Consultati Have you consulted your neighbours or the local cor		the proposal? Yes No			
If Yes, please provide details:	minumity about	the proposal:			
	JEIGHBOU	R WHO HAS SIGHT OF THE			
		M THEIR PROPERTY,			
ON ZAH					
8. Authority Employee / Member					
It is an important principle of decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related, by birth or otherwise, closely enough conclude that there was bias on the part of the decision-making that the means related that there was bias on the part of the decision-making that the means related the mea	that a fair-mind	pen and transparent. For the purposes of this question, "related to" ded and informed observer, having considered the facts, would e local planning authority.			
Do any of the following statements apply to you and	I/or agent?	Yes 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 rel				
9					

y. wateriais

1	المممم بمبين أطمم	description of existing and	I nyanasad matarial	and finishes to bouse	d in the building (de	Malitian avaludadly
-	rease provide a d	describition of existing and	i brobosed materials	s and imishes to be use	eu in the bullaina lac	emonuon excluded):

	3 1 1	3.	,			
÷	Existing (where applicable)	Proposed	Not applicable	Don't Know		
External walls			7			
Roof covering		2 , , , , , , , , , , , , , , , , , , ,	7			
Chimney		e	Y			
Windows	SOFTWOOD WINDOW FRAME AND SILL, SINGLE GLAZED	ACCOYA FRAME AND SILL DOUBLE GLAZED SEALED UNITS				
External doors	See					
Ceilings			9			
Internal walls	•					
Floors			5			
Internal doors	8		V			
Rainwater goods			1			
Boundary treatments (e.g. fences, walls)			D			
Vehicle access and hard standing			Y			
Lighting			T			
Others (add description)	¥		J			
Are you supplying additional information on submitted drawings or plans? Yes No If Yes, please state plan(s)/drawing(s) references:						

iy. Demoillion	Listea Building Alterations
Ooes the proposal include the partial or otal demolition of a listed building? Yes No	Do the proposed works include alterations to a listed building?
f Yes, which of the following does the proposal involve? a) Total demolition of the listed building: Yes No	If Yes, do the proposed works include: (you must answer each of the questions)
b) Demolition of a building within	a) Works to the interior of the building?
he curtilage of the listed building: Yes No Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building?
If the answer to c) is Yes:	c) Works to any structure or object fixed
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage) internally or externally?
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission) Please provide a brief description of the building or part of the	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):
building you are proposing to demolish:	
	7
Why is it necessary to demolish or extend (as applicable) all or part	
of the building(s) and or structure(s)?	in the same of the
	· · · · · · · · · · · · · · · · · · ·
	The confidence of the confiden
	Land a mark and a mark a Asis Altra Asis a
12 Listed Building Crading	(12 Immunity From Licting
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only	Has a Certificate of Immunity from Listing been sought in respect of this building?
one box must be ticked)	Yes No Don't know
Grade Ecclesiastical Grade	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know	

14. Ownersnip Certificates

One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A**

Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I certify/ The applicant certifies that on the day owner* of any part of the land or building to w	21 days before the date of this application nobody exhich the application relates.	cept myself/ the applicant was the
* "owner" is a person with a freehold interest or le	easehold interest with at least 7 years left to run.	
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
		The second secon
Regulation 6 of the Plan	nning (Listed Buildings and Conservation Areas) Re	adulations 1990
I certify/ The applicant certifies that: Neither Certificate A or B can be issued		guiations 1990
All reasonable steps have been taken part of it, but I have/ the applicant has	to find out the names and addresses of the other own	ers* of the land or building, or of a
* "owner" is a person with a freehold interest or le	easehold interest with at least 7 years left to run.	
The steps taken were:		
*		
Name of Owner	Address	Date Notice Served
, ,		
		1
Notice of the application has been published i (circulating in the area where the land is situat		
	n the following newspaper On the following than 21 down to	ng date (which must not be earlier
(Circulating in the area where the land is situat	n the following newspaper On the following than 21 days k	ng date (which must not be earlier before the date of the application):
(circulating in the area where the land is situat	n the following newspaper On the following than 21 days k	ng date (which must not be earlier refore the date of the application):
Signed - Applicant:	n the following newspaper On the following than 21 days k	ng date (which must not be earlier pefore the date of the application): Date DD/MM/YYYY):

14. Ownersnip Certificates (continuea)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 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* unable to do so. "owner" is a person with a freehold interest or leas				ates, but I have/ the a	pplicant has been
The steps taken were:	erioid iriterest with	acrease / years ren	toran.		
		2			
					and the second s
Notice of the application has been published in t (circulating in the area where the land is situated		spaper		ving date (which must before the date of the	
circulating in the area where the land is steaded	.,,		[octore the date of the	
Signed - Applicant:	Orsigne	d - Agent:	L	Date	DD/MM/YYYY):
Signed - Applicant.	Of signe	a Agent.			- DD/WW/1111).
15 Planning Application Poguiroman	te Chacklist	as de 22 maio en tratación de la estada en entre de la companya de la companya de la companya de la companya d Companya de la companya de la compa			
15. Planning Application Requirement Please read the following checklist to make sure y		he information in s	support of you	r proposal. Failure to	submit all
nformation required will result in your application	n being deemed i				
the Local Planning Authority (LPA) has been subr The original and 3 copies* of a completed and da		The original and	3 conject of o	ther plans and drawir	ogs or E
application form:	ited 🔄			ribe the subject of the	
The original and 3 copies* of a plan which identif and to which the application relates and drawn t				ne completed dated or D - as applicable):	4
dentified scale and showing the direction of Nor				design and access sta	atement,
		if required (see h	nelp text and g	uidance notes for det	ails):
*National legislation specifies that the applicant i total of four copies), unless the application is sub LPAs may also accept supporting documents in e	mitted electronica	ally or, the LPA indi	cate that a sm	aller number of copie:	s is required.
You can check your LPA's website for information	or contact their p	planning departme	ent to discuss t	hese options.	K).
16. Declaration /we hereby apply for planning permission/conse	ent as described in	this form and the	accompanying	r plans/drawings and	additional
information. I/we confirm that, to the best of my/	our knowledge, a	ny facts stated are	true and accur	rate and any opinions	given are the
genuine opinions of the person(s) giving them. Signed - Applicant:	Or signed - Agen	t:		Date (DD/MM/YYYY):	
				9/3/2025	(date cannot be
					pre-application)
		(10. A	Causta et Da		
		18. Agent		talis	
		Telephone nu			Extension
		Country code	: National n	umber:	number:
		Country code	:: Mobile nu	mber (optional):	
		Country code			
		Country code	rax numbe	er (optional):	
		Email address	(ontional)		
		Littali address	optional).		

other public land?	Yes	No
Agent	Applicant	Other (if different from the agent/applicant's details)
Telephone numb	er:	
AND THE REPORT OF THE PROPERTY	er feren en de	
	Agent	