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## 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 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:

### 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 | 2. Agent Name and Address |
|-------------------------------|---------------------------|
| Title: First name:            | Title: First name:        |
| Last name:                    | Last name:                |
| Company<br>(optional):        | Company<br>(optional):    |
| Unit: House House suffix:     | Unit: House House suffix: |
| House name:                   | House name:               |
| Address 1:                    | Address 1:                |
| Address 2:                    | Address 2:                |
| Address 3:                    | Address 3:                |
| Town:                         | Town:                     |
| County:                       | County:                   |
| Country:                      | Country:                  |
| Postcode:                     | Postcode:                 |

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| 3. Description of Proposed V  | Vork                             |   |   |
|---|----------------------------------|---|---|
| Please describe the proposals to alte   | er, extend or demolish the liste | ed building(s):                           |   |
|   |                                  |   |   |
|   |                                  |   |   |
|   |                                  |   |   |
|   |                                  |   |   |
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|   |                                  |   |   |
|   |                                  |   |   |
| Has the work already started withou   |                                  | 0   |   |
| If Yes, please state when the work wa   | as started (DD/MM/YYYY):         |   |   |
|   | (da                              | ate must be pre-application submission)   |   |
| Has the work been completed witho   | out consent? Yes                 | No  |   |
| If Yes, please state the date when the  | e work was completed (DD/MN      | М/ҮҮҮҮ):                                  |   |
|   |                                  | (date must be pre-application submission) |   |
| 4. Site Address Details   |                                  |   | — |
| Please provide the full postal addres   |                                  |   |   |
| Unit:   | House<br>number:                 | House<br>suffix:                          |   |
| House name:   |                                  |   |   |
| Address 1:  |                                  |   |   |
| Address 2:  |                                  |   |   |
| Address 3:  |                                  |   |   |
| Town:   |                                  |   |   |
| County:   |                                  |   |   |
| Postcode<br>(optional):   |                                  |   |   |
| Description of location or a grid refe<br>(must be completed if postcode is r | erence.                          |   |   |
| Easting:  |                                  | Northing:                                 |   |
| Description:  |                                  |   |   |
|   |                                  |   |   |
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|   |                                  |   |   |

| <b>5. Related Proposals</b> Are there any current applications, previous  |                     | 6. Pre-application Advice<br>Has assistance or prior advice been sought from the local   |
|---|---------------------|--|
| proposals or demolitions for the site? Yes  | No No               | authority about this application?  |
| If Yes please describe and include the planning appli reference number(s), if known:  | cation              | If Yes, please complete the following information about the advice<br>you were given. (This will help the authority to deal with this  |
| Description   | Reference<br>number | application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference:  |
|   |                     | Date (DD/MM/YYY):<br>(must be pre-application submission)<br>Details of pre-application advice received?   |
| 7. Neighbour and Community Consultatio<br>Have you consulted your neighbours or<br>the local community about the proposal? Yes<br>If Yes, please provide details: | n<br>No             | 8. Authority Employee / Member         With respect to the Authority, I am:       Do any of these         (a) a member of staff       statements apply to you?         (b) an elected member       Yes         (c) related to a member of staff       Yes         (d) related to an elected member       If Yes, please provide details of the name, relationship and role |

|   | Existing<br>(where applicable)                                    | Proposed                | applicable | Don<br>Kno |
|---|---|-------------------------|------------|------------|
| External walls                              |   |                         |            |            |
| Roof covering                               |   |                         |            |            |
| Chimney                                     |   |                         |            |            |
| Windows                                     |   |                         |            |            |
| External doors                              |   |                         |            |            |
| Ceilings                                    |   |                         |            |            |
| Internal walls                              |   |                         |            |            |
| Floors                                      |   |                         |            |            |
| Internal doors                              |   |                         |            |            |
| Rainwater goods                             |   |                         |            |            |
| Boundary treatments<br>(e.g. fences, walls) |   |                         |            |            |
| Vehicle access and hard standing            |   |                         |            |            |
| Lighting                                    |   |                         |            |            |
| Others<br>(add description)                 |   |                         |            |            |
|   | itional information on submitted dr<br>(s)/drawing(s) references: | awings or plans? Yes No |            | 1          |

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| 10. Demolition  | 11. Listed Building Alterations   |
|---|---|
| Does the proposal include the partial or<br>total demolition of a listed building? Yes No   | Do the proposed works include alterations to a listed building?   |
| If Yes, which of the following does the proposal involve?   | If Yes, do the proposed works include:  |
| a) Total demolition of the listed building: Yes No  | (you must answer each of the questions)   |
| b) Demolition of a building within<br>the curtilage of the listed building: Yes No  | a) Works to the interior of the building? Yes No  |
| c) Demolition of a part of the listed building: Yes No  | b) Works to the exterior of the building? Yes No  |
| If the answer to c) is Yes:   | c) Works to any structure or object fixed to the property (or buildings within  |
| i) What is the total volume of the<br>listed building?(cubic metres)  | its curtilage) internally or externally?  |
| ii) What is the volume of the part<br>to be demolished?(cubic metres)   | d) Stripping out of any internal wall, ceiling<br>or floor finishes (e.g. plaster, floorboards)? Yes No   |
| iii) What was the (approximate) date of the<br>erection of the part to be removed? (MM/YYYY)<br>(date must be pre-application submission)                             | If the answer to any of these questions is Yes, please provide<br>plans, drawings, photographs sufficient to identify the location,<br>extent and character of the items to be removed, and the<br>proposal for their replacement, including any new means of |
| Please provide a brief description of the building or part of the building you are proposing to demolish:   | structural support and state references for the plan(s)/drawing(s):   |
| Why is it necessary to demolish or extend (as applicable) all or part<br>of the building(s) and or structure(s)?  | 13. Immunity From Listing   |
|   |   |
| Please state the grading (if known) of the building in the list of<br>Buildings of Special Architectural or Historic interest? (Note: only<br>one box must be ticked) | Has a Certificate of Immunity from Listing been sought in respect of this building?   |
| Grade I Ecclesiastical Grade I  | If Yes, please provide the result of the application:   |
| Grade II* Ecclesiastical Grade II*  |   |
| Grade II Ecclesiastical Grade II  |   |
| Don't know  |   |
|   |   |

| 14. Ownership Certificates  |  |  |  |
|---|--|--|--|
| Regulation 6 of th  | icate A, B, C, or D, must be completed with this application form<br>CERTIFICATE OF OWNERSHIP - CERTIFICATE A<br>ne Planning (Listed Buildings and Conservation Areas) Regulations 199   | 90   |  |
| owner* of any part of the land or buildin   | e day 21 days before the date of this application nobody except myself/ th<br>to which the application relates.  | he applicant was the                                     |  |
| * "owner" is a person with a freehold intere  | st or leasehold interest with at least 7 years left to run.  |  |  |
| Signed - Applicant:   | Or signed - Agent:   | Date DD/MM/YYYY):  |  |
|   |  |  |  |
| I certify/ The applicant certifies that I have 21 days before the date of this applic   | <b>CERTIFICATE OF OWNERSHIP</b> - <b>CERTIFICATE B</b><br>e Planning (Listed Buildings and Conservation Areas) Regulations 199<br>re/the applicant has given the requisite notice to everyone else (as listed<br>ation, was the owner* of any part of the land or building to which t<br>st or leasehold interest with at least 7 years left to run. | 90<br>below) who, on the day<br>his application relates. |  |
| Name of Owner   | Address  | Date Notice Served                                       |  |
|   |  |  |  |
|   |  |  |  |
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|   |  |  |  |
| Signed - Applicant:   | Or signed - Agent:   | Date DD/MM/YYYY):  |  |
|   |  |  |  |
|   |  |  |  |
| <ul> <li>I certify/ The applicant certifies that:</li> <li>Neither Certificate A or B can be</li> <li>All reasonable steps have been</li> </ul> | CERTIFICATE OF OWNERSHIP - CERTIFICATE C<br>e Planning (Listed Buildings and Conservation Areas) Regulations 199<br>issued for this application<br>aken to find out the names and addresses of the other owners <sup>*</sup> of the land<br>nt has been unable to do so.<br>st or leasehold interest with at least 7 years left to run.              |  |  |
|   |  |  |  |
| Name of Owner   | Address  | Date Notice Served                                       |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |
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|   |  |  |  |
| Notice of the application has been publi  | shed 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):  |  |
|   |  | ,  |  |

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| 14. Ownership Certificates (continued   | i)  |   |  |   |
|---|---|---|--|---|
|   | RTIFICATE OF OWNE                             |   | ICATE D<br>tion Areas) Regulations 199                             | 00  |
| I certify/ The applicant certifies that:  |   | js and conserva                         | ition Areas) Regulations 179                                       |   |
| <ul> <li>Certificate A cannot be issued for this ap</li> <li>All reasonable steps have been taken to</li> </ul> | plication<br>find out the names a             | nd addresses of                         | evervone else who, on the da                                       | v 21 days before the                          |
| date of this application, was the owner*<br>unable to do so.  | of any part of the lan                        | id to which this a                      | pplication relates, but I have/                                    | the applicant has been                        |
| * "owner" is a person with a freehold interest or leas  | sehold interest with at                       | least 7 years left t                    | 'o run.  |   |
| The steps taken were:   |   |   |  | ]   |
|   |   |   |  |   |
|   |   |   |  |   |
|   |   |   |  |   |
|   |   |   |  |   |
| Notice of the application has been published in<br>(circulating in the area where the land is situated          | the following newspa<br>d):                   | aper                                    | On the following date (which than 21 days before the date          | n must not be earlier<br>of the application): |
|   |   |   |  | <u> </u>                                      |
|   | On simo si                                    | Americk                                 |  |   |
| Signed - Applicant:   | Or signed -                                   | Agent:                                  |  | Date DD/MM/YYYY):                             |
|   |   |   |  |   |
|   |   |   |  |   |
| <b>15. Planning Application Requiremen</b><br>Please read the following checklist to make sure                  |   | information in su                       | innert of your proposal. Eaili                                     | iro to submit all                             |
| information required will result in your application  |   |   |  |   |
| the Local Planning Authority (LPA) has been sub   | mitted  | The original and                        | 3 copies* of other plans and d                                     | Irawings or                                   |
| The original and 3 copies* of a completed and da  |   |   | ssary to describe the subject                                      |   |
| application form:   | (   | The original and 3<br>Ownership Certif  | 3 copies* of the completed da<br>icate (A, B, C, or D - as applica | ated<br>Ible):                                |
| The original and 3 copies* of a plan which identified land to which the application relates and drawn           | to an   | •                                       | 3 copies* of a design and acce                                     |   |
| identified scale and showing the direction of Nor   | rth: 🔄 i                                      | f required (see h                       | elp text and guidance notes fo                                     | or details):                                  |
| *National legislation specifies that the applicant total of four copies), unless the application is sub         |   |   |  |   |
| LPAs may also accept supporting documents in e  | electronic format by r                        | post (for example                       | , on a CD, DVD or USB memoi  |   |
| You can check your LPA's website for information  |   | ining departmen                         | it to discuss these options.                                       |   |
| 16. Declaration   |   |   | ,  |   |
| I/we hereby apply for planning permission/conse<br>information. I/we confirm that, to the best of my,           | ent as described in th<br>/our knowledge, any | is form and the a<br>facts stated are t | ccompanying plans/drawing:<br>rue and accurate and any opi         | s and additional nions given are the          |
| genuine opinions of the person(s) giving them.  |   |   |  | -   |
| Signed - Applicant:   | Or signed - Agent:                            |   | Date (DD/MM/Y  | (date cannot be                               |
|   |   |   |  | pre-application)                              |
| 17. Applicant Contact Details   | )   | 18 Agent C                              | ontact Details   |   |
| ••  |   |   |  |   |
| Telephone numbers   | Extension                                     | Telephone nur                           | nders  | Extension                                     |
| 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):   |   |
|   |   |   |  |   |
| Email address (optional):   |   | Email address                           | (optional):  |   |
|   |   |   |  |   |
|   |   |   |  |   |

| 19. Site Visit  |                    |           |   |
|---|--------------------|-----------|---|
| Can the site be seen from a public road, public footpath, bridleway or  | other public land? | Yes       | No  |
| If the planning authority needs to make an appointment to carry<br>out a site visit, whom should they contact? ( <i>Please select only one</i> )<br>If Other has been selected, please provide: | Agent              | Applicant | Other (if different from the agent/applicant's details) |
| Contact name:   | Telephone numbe    | er:       |   |
|   |                    |           |   |
| Email address:  |                    |           |   |