**Planning Services** 

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JULIAN

First name:

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

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## Publication of applications on planning authority websites

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Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

First name:

1. Applicant Name and Address

QUAILE

Title:

Last name:

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

Title:

Last name:

2. Agent Name and Address

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Company (optional):	Company (optional): JULIMY D. HOOD LTD
Unit: House number: House suffix:	Unit: House number: House suffix:
House name: MANOK FARM	House name: WHITG HOUSE BARN
Address 1: GATLINIKIMAN LANE	Address 1: BURNT WILL LANE
Address 2: +AS BURKH	Address 2: CARLTON LOLVILLE
Address 3:	Address 3:
Town:	Town: LOWESTOFT
County: NORFOLK	County: SUFFOLK
Country:	Country:
Postcode: NR 15 1LP	Postcode: NR33 8HV
3. Description of Proposed Work	
Please describe the proposals to alter, extend or demolish the listed l	ouilding(s):
REPLACEMENT WASERVATORY	MM GARBEN Roma
	\$Date:: 2014-02-10 #\$ \$Revision: 5975 \$

3. Description of Proposed Work (continued)	4. Site Address Details  Places provide the full postal address of the application site
Has the work already started without consent?  If Yes, please state when the work was started (DD/MM/YYYY):  (date must be pre-application submission)  Has the work been completed without consent?  If Yes, please state the date when the work was completed (DD/MM/YYYY):	Please provide the full postal address of the application site.  Unit: House number: House suffix: House name: Address 1: SAYLINGHUM LANG  Address 2: HASBVKGH  Address 3: Town:  County: WKFALK  Postcode (optional): WK 15 ALP  Description of location or a grid reference. (must be completed if postcode is not known):  Easting: Northing:  Description:
(date must be pre-application submission)  5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site?  If Yes please describe and include the planning application reference number(s), if known:    Description   Reference number   Reference	Has assistance or prior advice been sought from the local authority about this application?  Yes  No  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 known, and then complete as much as possible:  Officer name:  Reference:  Date (DD/MM/YYYY): (must be pre-application submission)  Details of pre-application advice received?
7. Neighbour and Community Consultation  Have you consulted your neighbours or the local community about the proposal?  If Yes, please provide details:	8. Authority Employee / Member 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 the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	
External walls	KEO BRICK REO BRICK			
Roof covering	POLLCARBONACE	ZINC		
Chimney				
Windows	BROWN STAN	BLACK CASEMENTS		
External doors	BROWN STANN	GLACK ALMINIMA		
Ceilings				
Internal walls	EXISTIME BRICK	ERISTIME BRICK		
Floors	OMC	DAK / THE		
Internal doors	WLALE ED	MARED		
Rainwater goods	upvc	FLACK PAINTED STEEL		
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting				
Others (add description)				
	itional information on submitted drawings or	plans? Yes No		<u> </u>
If Yes, please state plan 281 · 01 281 · 034 291 · 04 A	n(s)/drawing(s) references:	281-07 ATTIC STD	MRS PLAN 1 SECTI	VS Lan

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building? Yes No	Do the proposed works include alterations to a listed building?  Yes No
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building:	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building:  Yes  No	a) Works to the interior of the building?
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 listed building?(cubic metres)	its curtilage) internally or externally?  Yes  No
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 building you are proposing to demolish:	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):
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Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	. 07
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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 Don't know
Grade   Ecclesiastical Grade	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II	
Don't know	

## 14. Ownership 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 l 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. \* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 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\* 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. Name of Owner Date Notice Served Address Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 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\* of the land or building, or of a part of it, 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: Name of Owner **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):

14. Ownership Certificates (continued)	
CERTIFICATE OF OWNE  Regulation 6 of the Planning (Listed Building 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 a	ership - Certificate D  gs and Conservation Areas) Regulations 1990  and addresses of everyone else who, on the day 21 days before the addresses of everyone relates, but I have the applicant has been the least 7 years left to run.
Notice of the application has been published in the following newspark (circulating in the area where the land is situated):	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/YYYY):
The original and 3 copies* of a completed and dated application form:  The original and 3 copies* of a plan which identifies the land to which the application relates and drawn to an	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):  The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details):  ginal plus three copies of the form and supporting documents (a or, the LPA indicate that a smaller number of copies is required. cost (for example, on a CD, DVD or USB memory stick).
16. 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:  Or signed - Agent:	is form and the accompanying plans/drawings and additional
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional).  Country code:	Telephone numbers  Country code: National number:  DIFU

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 out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide:	Agent	Applicant	Other (if different from the agent/applicant's details)
Contact name:	Telephone number	er:	
JUNIAN HOOD	01502	5892	06
Email address: Juhan. 1. hood 20	novi! · com		