**Durham County Council** 

Regeneration and Economic Development Planning Development County Hall Durham DH1 5UL



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

First name: ANDREW

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.

1. Applicant Name and Address

Title:

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

2. Agent Name and Address

First name

Last name: Wilkinson	Last name:
Company (optional):	Company (optional):
Unit: House number: 14 House suffix:	Unit: House House suffix:
House name: Durkam House	House name:
Address 1: 14 HIGH ROW	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: GAINFORD	Town:
County: Duenam	County:
Country: UK	Country:
Postcode: DL2 3DN	Postcode:
3. Description of Proposed Work	
Please describe the proposals to alter, extend or demolish the listed by	puilding(s):
Ranovar of A WALL ON TH	E SOUTHERN BOUNTARY FACINE
SPA/MAIN ROND. REPLACEMENT	TIMBER GATE TO PREVIOE
ON STREET PARKING BAY X	ER ONE VEHICLE WITHIN
THE DEMISE OF THE HE	QUIE 1 GAZDELLOS.
THERE IS AN EXISTING D	ROP CURB ONTO THE HIGHE
WAT.	

3. Description of Proposed Work (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
Has the work already started without consent?	Unit: House number: 14 House suffix:
If Yes, please state when the	house name: Dueton Keuse
work was started (DD/MM/YYYY):	Address 1: 14 HIEN Rew
	Address 2:
	Address 3:
(date must be pre-application submission)	Town: GAN FOZD
Has the work been	County: Court Durenon
completed without consent? Yes No	Postcode (optional): DLZ 33N
If Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
	Horse
(date must be pre-application submission)	
S. Related Proposals  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	6. Pre-application Advice  Has assistance or prior advice been sought from the local authority about this application?  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?  Attacks SITE & Cancusco ware is Not historic. Break Block & Stone Curb. Remark Net Dimagnia.  To Preserry on Consciuntion Alex
7. Neighbour and Community Consultation	8. Authority Employee / Member
Have you consulted your neighbours or the local community about the proposal?	With respect to the Authority, I am:  (a) a member of staff  Do any of these statements apply to you?
If Yes, please provide details:	(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
11	OHLY A PARISH CONNECTION
l II	oracle it indight confidence.

	Existing (where applicable)	Proposed		Not applicable	Don't
External walls	STUME CLADING	TIMBEZ GATE			
Roof covering					
Chimney					
Windows					
External doors					
Ceilings					
Internal walls	Breeze BLOK PENDERES	CC.	11		
Floors					
Internal doors					
Rainwater goods					
Boundary treatments (e.g. fences, walls)	WAL	THUS OR CHATE			
Vehicle access and hard standing	FALLS STANDING	No crimer	-		
Lighting					
Others (add description)					
are you supplying addit Yes, please state plan(	tional information on submitted drawings or plans s)/drawing(s) references:	? Yes No			
600000		extin Pund			

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?
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 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?
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)?
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:	
Remove of AN External GARDEN	SEE ATTACKES
BOUNDARY WALL	
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	*
TO CREATE BADDET TEXASOS	
ON STREET PARKING.	
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of	Has a Certificate of Immunity from Listing been sought in respect of
Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	this building?
	Yes No Don't know
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 Outposship Coulification					
14. Ownership Certificates	etificate A B C	B			
One cer	CERTIFICAT	D, must be comp	pleted with this app IP - CERTIFICATE A	lication form	
Regulation 6 of I certify/ The applicant certifies that on owner* of any part of the land or buildi	the Planning (List	ted Buildings an	d Conservation Are	as) Regulations 19 dy except myself/	990 The applicant was the
* "owner" is a person with a freehold inte					
Signed - Applicant:					5 - 55
orgined Applicant.		Or signed - Ager	nt:		Date DD/MM/YYYY):
					7/2/2023
21 days before the date of this appl * "owner" is a person with a freehold intel	the Planning (Listo ave/the applicant I	ed Buildings and has given the req	P - CERTIFICATE B d Conservation Area juisite notice to ever art of the land or k 7 years left to run.		
Name of Owner		А	ddress	**************************************	Date Notice Served
AMOREN WILKINSON	14 4	1012an	BANIFERD	DIZ 30H	,
			У	3	
Signed - Applicant:		Or signed - Agen	t:		Date DD/MM/YYYY):
Regulation 6 of the certify/ The applicant certifies that:  Neither Certificate A or B can be All reasonable steps have been a part of it, but I have/ the applica * "owner" is a person with a freehold interest The steps taken were:	issued for this app taken to find out th	plication ne names and add			
Name of Owner		^~	dress		D. I. N. II. O.
		Ad	u1 G22		Date Notice Served
l Notice of the application has been publis circulating in the area where the land is s	hed in the followir	ng newspaper	On the follo	owing date (which i	must not be earlier
and and whole the falla is	madiodj.		man 21 day	s before the date o	or the application):
igned - Applicant:		r signed - Agent:			Data DD 2 44 4 2 2 2 2
Transition		i signed - Agent:			Date DD/MM/YYYY):

14. Ownership Certificates (continued)			
Regulation 6 of the Planning (Lister I certify/ The applicant certifies that:  Certificate A cannot be issued for this application All reasonable steps have been taken to find out th date of this application, was the owner* of any part unable to do so.	ne names and addresses of t of the land to which this	everyone else who, on the day 2° application relates, but I have/the	1 days before the e applicant has been
* "owner" is a person with a freehold interest or leasehold inter The steps taken were:	rest with at least 7 years left	to run.	
Notice of the application has been published in the followir (circulating in the area where the land is situated):	ng newspaper	On the following date (which me than 21 days before the date of	ust not be earlier the application):
Signed - Applicant:	Or signed - Agent:	Da	ate DD/MM/YYYY):
15. Planning Application Requirements - Check Please read the following checklist to make sure you have se information required will result in your application being de the Local Planning Authority has been submitted.  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 identified scale and showing the direction of North:	ent all the information in seemed invalid. It will not be a three original and information necessity. The original and Ownership Certif	upport of your proposal. Failure to e considered valid until all inform 3 copies of other plans and drawiessary to describe the subject of the 3 copies of the completed dated icate (A, B, C, or D - as applicable) 3 copies of a design and access stelp text and guidance notes for describe considered.	nation required by ings or he application:
16. Declaration  I/we hereby apply for planning permission/consent as description information. I/we confirm that, to the best of my/our knowle	ribed in this form and the a	ccompanying plans/drawings an	d additional
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed		rue and accurate and any opinion  Date (DD/MM/YYYY)	ns given are the
genuine opinions of the person(s) giving them.	- Agent:	Date (DD/MM/YYYY	ns given are the  (): (date cannot be
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  17. Applicant Contact Details  Telephone numbers	- Agent:  18. Agent C	Date (DD/MM/YYYY	ns given are the (/): (date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  External contact Details	- Agent:	Date (DD/MM/YYYY	ns given are the  (): (date cannot be
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  External contact Details	- Agent:  18. Agent Control Telephone nur	Date (DD/MM/YYYY	ns given are the (/): (date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  Country code: National number:  Extenum	- Agent:  18. Agent Country code:	Date (DD/MM/YYYY    -   2   2023  contact Details  nbers  National number:	ns given are the (/): (date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):	ension mber:    Agent Country code:   Country code:	Date (DD/MM/YYYY    -   2   2023  contact Details  nbers  National number:  Mobile number (optional):  Fax number (optional):	ns given are the (/): (date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	ension mber:    Agent Country code:   Country	Date (DD/MM/YYYY    -   2   2023  contact Details  nbers  National number:  Mobile number (optional):  Fax number (optional):	ns given are the (/): (date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Or signed  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Email address (optional):  Tenail address (optional):	ension mber:  Country code:  Country code:  Country code:  Email address (	Date (DD/MM/YYYYY    -   2   2023    contact Details   nbers   National number:   Mobile number (optional):   Fax number (optional):   optional):	(date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Telephone numbers  Country code:  National number:  Country code:  Mobile number (optional):  Country code:  Fax number (optional):  Email address (optional):  The planning authority needs to make an appointment to caput a site visit, whom should they contact? (Please select only of the plase provide:	ension mber:  Country code:  Country code:  Country code:  Email address (  Carry cone)  Agent	Date (DD/MM/YYYYY    7   2   2023    Sontact Details   National number:   Mobile number (optional):   Fax number (optional):   Optional   Other (if agent/ag	(date cannot be pre-application)
genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed  Telephone numbers  Country code: National number:  Country code: Mobile 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, bridle for the planning authority needs to make an appointment to caput a site visit, whom should they contact? (Please select only optional):	ension mber:  Country code:  Country code:  Country code:  Email address (	Date (DD/MM/YYYYY    7   2   2023    Sontact Details   National number:   Mobile number (optional):   Fax number (optional):   Optional   Other (if agent/ag	(date cannot be pre-application)  Extension number:

\$Date:: 2014-02-10 #\$ \$Revision: 5975 \$