

UTTLESFORD DISTRICT COUNCIL

Council Offices, London Road, Saffron Walden, Essex CB11 4ER, Telephone (01799) 510510
Textphone Users 18001
Email planning@uttlesford.gov.uk
Website www.uttlesford.gov.uk

Agent Name and Address

First name:

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

Planning (Listed Buildings and Conservation Areas Act) 1990

Publication of planning applications on council websites

First name: COLIN + HELEN

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Title:

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.

Lunnon .	Last name:
	Company (optional):
House House suffix:	Unit: House House suffix:
Braggs Farm	House name:
ELDER STREET	Address 1:
NIMBISH	Address 2:
	Address 3:
SAFFRON WALDEN	Town:
ESSEX	County:
uk	Country:
CB10 2XA	Postcode:
ption of Proposed Work	
Manager Commission Anna Commission Commissio	building(s):
NATION. INSTALLATION OF BU E & SIZE AND LOCATION AS BOWS TO WATCH EXISTING O	ERN WINDOWS IN EASTERN/SIDE O. RESPORE - MADE WINDOWS OF S EXISTING. DESIGN OF NEW RIGINAL WINDOWS IN NORTH HOMAL INFORMATION PROVIDED).
	House number: House suffix: BRAGGS FARM ELDER STREET WIMBISH SAFFRON WALDEN ESSEX: UK CRIO 2XA ption of Proposed Work cribe the proposals to alter, extend or demolish the listed woual of BNO. ROTTEN work SUATION. INSTALLATION OF BN SE & SIZE AND LOCATION AS BOWS TO WATCH EXISTING O

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? Yes No	Unit: House House suffix:
If Yes, please state when the	House name: BRAGGS FARM
work was started (DD/MM/YYYY):	Address 1: ELDER STREET
	Address 2: WINDISH
	Address 3:
(date must be pre-application submission)	TOWN: SAFFRON WALDEN
Has the work been	County: ESSEX
completed without consent? Yes X No	Postcode (optional): CB10 2XA
If You who so state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
If Yes, please state the date when the work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
	\{\bar{\}}
(date must be pre-application submission)	[{}
Ag	
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site? Yes No	Has assistance or prior advice been sought from the local authority about this application?
If Yes please describe and include the planning application	authority about this application? Yes No
reference number(s), if known:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Description Reference	application more efficiently).
	Please tick if the full contact details are not known, and then complete as much as possible:
	Officer name:
15 nex	Reference:
	Date (DD/MM/YYYY):
	(must be pre-application submission)
	Details of pre-application advice received?
}	[3]
	1]}]
7. Naighbour and Community Consultation	8. Council Employee / Member
7. Neighbour and Community Consultation Have you consulted your neighbours or	is the applicant or agent related to
the local community about the proposal? Yes No	any member of staff or elected member of the council? Yes No
If Yes, please provide details:	If Yes, please provide details:
NEIGHBOURS IN PROPERTY ADJACENT	-}}}
ON BASTERN SIDE CONSULTED	
AND THEM SUPPORT THE APPLICATION	4})
[]	MU

	Existing (where applicable)	Proposed	¥i	Not applicable	Don'i Know
External walls				X	
Roof covering			8	×	
Chimney	2		3. 3.	×	
Windows	SOFT WOOD FRAMES AND CILLS; SINGLE GLAZING.	SOFT WOOD FRAM HARD WOOD CILL 4 MM SINGLE GL	JES; S; AZING.		
External doors			2	×	
Ceilings				×	
Internal walls				×	
Floors		Service Services Services Services	11 15 15	×	
Internal doors			6	×	Ω.
Rainwater goods	3,000		t 1	×	
Boundary treatments (e.g. fences, walls)				×	
Vehicle access and hard standing				×	
Lighting				×	
Others (add description)			1	×	
	itional information on submitted drawings or plans)/drawing(s) references:	ans? Yes No			

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:	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
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage internally or externally? Yes No
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 building you are proposing to demolish:	lf 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):
Suitaing you are proposing to serrous.	REMOVAL OF 3 NO. ROTTEN MODERN
<u> </u>	WINDOWS IN EASTERN SIDE
	ELEVATION . INSTALLATION OF 3NO.
ll _b	BESPOKE-MADE WINDOWS OF SANE
Why is it necessary to demolish or extend (as applicable) all or pa	TI SIZE AND LOCATION AS EXISTING.
of the building(s) and or structure(s)?	DESIGN OF NEW WINDOWS TO
	WATCH EXISTING ORIGINAL
€	WINDOWS IN NORTH FRONT
D	ELEVATION (SEE ASSITTIONAL
	INFORMATION PROVIDED.
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 I Ecclesiastical Grade II	If Yes, please provide the result of the application:
Grade II Ecclesiastical Grade II*	
Grade II* Don't know D	
	* ************************************
Ecclesiastical Grade	

	1-1	
e day 21 days before the date of this	application nobody except r	nyself/ the applicant was th
nterest or leasehold interest with at lea	ist 7 years left to run) of any p	art of the land or building t
Or signed - Agent:		Date DD/MM/YYYY):
<u> </u>		07/08/2022
of of the Planning (Listed Buildings e/the applicant has given the requisite was the owner (owner is a person with	and Conservation Areas) Re e notice to everyone else (as li	sted below) who, on the day
Addre	ss	Date Notice Served
		5 5000 5000 5000 B
		
		37
		10
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	Tad Sala	D
Or signed - Agent:		Date DD/MM/YYYY):
7		
to find out the names and addresses o	f the other owners (owner is a ling, or of a part of it, but I hav	person with a freehold re/ the applicant has been
	77.75	
	0	2.419
		Date Notice Served
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S		
ned in the following newspaper ituated):	On the following date (v than 21 days before the	which must not be earlier date of the application):
		ı
Section 1		
Or signed - Agent:		Date DD/MM/YYYY):
	CERTIFICATE OF OWNERSHIP - Clanning (Listed Buildings and Conseine day 21 days before the date of this interest or leasehold interest with at lease of the Planning (Listed Buildings e/the applicant has given the requisite, was the owner (owner is a person withing to which this application relates. Addre Or signed - Agent: Addre Or signed - Agent: CERTIFICATE OF OWNERSHIP - Clanding to which this application relates. Addre Or signed - Agent: CERTIFICATE OF OWNERSHIP - Clanding (Listed Buildings and Continuous Contin	CERTIFICATE OF OWNERSHIP - CERTIFICATE B no 6 of the Planning (Listed Buildings and Conservation Areas) Re e/the applicant has given the requisite notice to everyone else (as lie, was the owner (owner is a person with a freehold interest or leasehole ing to which this application relates. Address CERTIFICATE OF OWNERSHIP - CERTIFICATE C the Town and Country Planning (General Development Procedu a Planning (Listed Buildings and Conservation Areas) Regulation do for this application to find out the names and addresses of the other owners (owner is a st 7 years left to run) of the land or building, or of a part of it, but I have Address Address Address On the following date (w than 21 days before the

14. Certificates (continued)				*	
CERTIFICAT Certificate under Regulation 6 of the Planning (Listed I certify/ The applicant certifies that: S Certificate A cannot be Issued for this application All reasonable steps have been taken to find out the this application, was the owner (owner is a person with the context of the context of the certification).	Buildings ar	ddresses of eve	n Areas) Regulation yone else who, on t	he day 21 days befo	ore the date of
the land to which this application relates, but I have/	the applican	t has been unak	le to do so.		6
The steps taken were:					
1					
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	- 22	/_			
Notice of the application has been published in the follo (circulating in the area where the land is situated):	wing newapa	per	On the following d than 21 days befor	ate (which must no e the date of the ap	t be earlier plication):
			<u> </u>	<u></u>	O.
Signed - Applicant:	Or signed -	Agent:		Date DE	D/MM/YYYY):_
	7 F 74 St	2 3	8 9 M		
			<u> </u>	334	
15. Planning Application Requirements - Chaplease read the following checklist to make sure you have information required will result in your application being the Local Planning Authority has been submitted. 4 copies of a completed and dated application form: 4 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	e sent all the i	4 copies of hecessary		intil all information drawings or inform ect of the application	required by
****		10 10 E			***
16. Declaration	eeriboel in thi	o form and the		denulase and add	Bland
I/we hereby apply for planning permission/consent as de information.		s form and the	6 A 250	379	itional .
I/we hereby apply for planning permission/consent as de information.	escribed in thi	s form and the	Date (DD/MM/YYYY):	
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I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign			Date (DD/MM/YYYY):	
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I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code. Pax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, in the site be seen from a public road, public footpath a public road, public footpath a public road, pu	Extension number:	18. Agent Country code Country code Country code Email address	Date (O 7 Contact Details mbers National number (Mobile number (Fax number (opt (optional):	DD/MM/YYYY): OB 2023 pr Optional): ional):	Extension number:
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