

Newtown St Boswells Melrose TD6 0SA Tel: Payments/General Enquiries 01835 825586 Email: regadmin@scotborders.gov.uk

Applications cannot be validated until all the necessary documentation has been submitted and the required fee has been paid.

Thank you for completing this application form:

ONLINE REFERENCE

100658357-002

The online reference is the unique reference for your online form only. The Planning Authority will allocate an your form is validated. Please quote this reference if you need to contact the planning Authority about this app		
Description of Proposed Works to Listed Building		
Are the proposals to alter, extend or demolish the listed building(s)? *	X Yes ☐ No	
If Yes, please provide further details: * (Max 500 characters)		
Internal alterations to enable conversion of residential flat to office and external vents serving bathroom extr	ractor systems	
Has the work already been started and/or completed? *		
No □ Yes – Started □ Yes - Completed		
Please Note: it can be a criminal offence to undertake works that require listed building consent in advance of	obtaining consent.	
Applicant or Agent Details		
Are you an applicant or an agent? * (An agent is an architect, consultant or someone else acting on behalf of the applicant in connection with this application)	olicant 🛛 Agent	

Agent Details			
Please enter Agent detail	s		
Company/Organisation:	Ferguson Planning		
Ref. Number:		You must enter a Building Name or Number, or both: *	
First Name: *	Ferguson	Building Name:	Shiel House
Last Name: *	Planning	Building Number:	54
Telephone Number: *	01896 668744	Address 1 (Street): *	Island Street
Extension Number:		Address 2:	
Mobile Number:		Town/City: *	Galashiels
Fax Number:		Country: *	Scotland
		Postcode: *	TD1 1NU
Email Address: *	Ruaraidh@fergusonplanning.co.uk		
Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity			
Applicant Det Please enter Applicant de			
Title:	idais .	You must enter a Building Name or Number, or both: *	
Other Title:		Building Name:	Mertoun Estate Office
First Name: *		Building Number:	
Last Name: *		Address 1 (Street): *	St Boswells
Company/Organisation	Mertoun Estate Farms Ltd	Address 2:	
Telephone Number: *		Town/City: *	Melrose
Extension Number:		Country: *	Scotland
Mobile Number:		Postcode: *	TD6 0EA
Fax Number:			
Email Address: *	Ruaraidh@fergusonplanning.co.uk		

Site Address	s Details		
Planning Authority:	Scottish Borders Council		
Full postal address of the	he site (including postcode where available	le):	_
Address 1:	MERTOUN HOUSE		
Address 2:	ST BOSWELLS		
Address 3:			
Address 4:			
Address 5:			
Town/City/Settlement:	MELROSE		
Post Code:	TD6 0EA		
Northing	631735	Easting	361786
Existing and Proposed Uses Please describe the current use: * (Max 500 characters) Office (Class 4) and Butler's flat (Class 9 and sui generis) Please describe the proposed use: * (Max 500 characters) Office (Class 4)			
Pre-Applicat	ion Discussion		
Have you discussed yo	our proposal with the planning authority? *		☐ Yes ☒ No

Listed Building Category		
Please state the category of listing (if known) of the building in the list of Buildings of Special Architectural or Historic interest: * Category A		
☐ Category B		
☐ Category C		
☐ A (Group)		
☐ B (Group)		
Ecclesiastical Category A		
☐ Ecclesiastical Category B		
Ecclesiastical Category C		
☐ Don't Know		
Demolition of Listed Building		
Does the proposal involve demolition of a listed building or a building within the curtilage of a listed building? *		
Total or substantial demolition of the listed building		
☐ Total or substantial demolition of a building within the curtilage of the listed building		
Other (partial demolition or alterations)		
Listed Building Alterations		
Do the proposed works include alterations and/or extension to a listed building? *		
(This may be in addition to any demolition works specified previously)		
Does the proposal include:		
Works to the exterior of the building? This would include works to any structure or object fixed to the building 🗵 Yes 🗌 No		
Or to any other buildings within its curtilage: *		
Works to the interior of the building? This should include any stripping out of any internal features eg. Wall, Ceiling, plasterwork, joinery, panelling, fireplaces, chimney pieces, staircases, ironmongery, doors, flooring, Floor finishes/floorboards, tiling, stencilled decoration, fixed furniture and fittings, including machinery: *		
Please state the number of attachments you will be including with this proposal, this may include plans, drawings and photographs sufficient to identify the location, extent and character of the items to be altered, extended or removed, and the proposal for their replacement, including any new means of structural support and detailed specification of proposed finishing materials.		
Number of plans, drawings and photographs in total? *		
Proposal Relating to Listed Building		
Are there any current applications or existing consents or permissions for this site? *		
Planning Service Employee/Elected Member Interest		
Is the applicant, or the applicant's spouse/partner, either a member of staff within the planning service or an elected member of the planning authority? *		

Certificates and Notices		
Certificate and Notice		
The Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997		
The Town and Country Planning (Listed Building and Buildings in Conservation Areas) (Scotland) Regulations	1987	
One Certificate must be completed and submitted along with this form; either Certificate A, Certificate B or Cer	rtificate C.	
Are you the sole owner of ALL the land/building relevant to this proposal? *	X Yes ☐ No	
Certificate Required		
The following Land Ownership Certificate is required to complete this section of the proposal:		
Certificate A		
Land Ownership Certificate		
Certificate and Notice The Planning (Listed Buildings and Conservation Areas) (Scotland) act 1997 The Town and Country Planning (Listed Buildings and Buildings in Conservation Areas) (Scotland) Regulations 1987		
Certificate A		
I hereby certify that – (See the help section for notes)		
(1) - No person other than myself/the applicant was an owner [Note 1] of any part of the land to which the application relates at the beginning of the period of 21 days ending with the date of the accompanying appeal.		
Signed: - Ferguson Planning		
Date: 30/01/2024 10:51:27		
☑ Please tick here to certify this Certificate. *		
Checklist – Application for Listed Building Consent		
Please complete the following checklist to make sure you have provided all the necessary information in support of your application. Failure to submit the necessary information may result in your application being deemed invalid. The planning authority will not start processing your application until it is valid.		
A Location plan which identifies the land to which the application relates drawn to an identified scale And showing the direction of north. *	⊠ Yes □ No	
A copy of other detailed plans, drawings, photographs (with annotations to describe the details of Materials and workmanship) as necessary to describe your proposals. *		
Elevations. *	🛛 Yes 🗌 No	
Floor Plans. *	🛛 Yes 🗌 No	
Roof Plan. *	🛛 Yes 🗌 No	

Does your plan include:			
Sections. *		🛛 Yes 🗌 No	
Perspectives of Photomontag	ges. *	🛛 Yes 🗌 No	
Block Plan. *		🛛 Yes 🗌 No	
Special Detailed Drawing. *		Yes X No	
Detailed specification of finish	nes. *	Yes X No	
Current or old photographs. *		🛛 Yes 🗌 No	
What other information are yo	ou submitting in support of your application? *		
Design Statement. Supporting Statement. Condition Survey Report. Feasibility Study. Development Appraisal. Environmental Impact Statement. Conservation Survey/Statement/Plan. Other.			
Declare – Listed Building Consent			
I, the applicant/agent certify that this is an application for listed building consent as described in this form the accompanying plan/drawings and additional information.			
Declaration Name:	- Ferguson Planning		
Declaration Date:	30/01/2024		