

## **Regulatory Service - Development Management**

Correspondence address Cornwall Council - Planning, New County Hall, Treyew Road, Truro, TR1 3AY **Telephone** 0300 1234 151 | **Email** planning@cornwall.gov.uk

www.cornwall.gov.uk

Application for Listed Building Consent for alterations, extension or demolition of a listed building

Planning (Listed Buildings and Conservation Areas Act) 1990 (as amended)

## Publication of applications on planning authority websites

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.

| Site Location   |  |
|---|--|
| Disclaimer: We can only make recomm   | nendations based on the answers given in the questions.  |
| If you cannot provide a postcode, the de help locate the site - for example "field to | escription of site location must be completed. Please provide the most accurate site description you can, to be the North of the Post Office". |
| Number  |  |
| Suffix  |  |
| Property Name   |  |
| Leedstown Methodist Church  |  |
| Address Line 1  |  |
| Chapel Road   |  |
| Address Line 2  |  |
|   |  |
| Address Line 3  |  |
| Cornwall  |  |
| Town/city   |  |
| Leedstown   |  |
| Postcode  |  |
| TR27 6BD  |  |
|   |  |
| Description of site location  | must be completed if postcode is not known:  |
| Easting (x)   | Northing (y)   |
| 160535  | 34210  |
| Description   |  |

| Applicant Details  |
|--|
| Name/Company   |
| Title  |
|  |
| First name   |
| Ruth   |
| Surname  |
| Williams   |
| Company Name   |
| LeedstownUnitedMethodistChapel                             |
|  |
| Address  |
| Address line 1   |
| Chy growyn   |
| Address line 2   |
| SchoolRoad   |
| Address line 3   |
| Leedstown  |
| Town/City  |
| Hayle  |
| County   |
|  |
| Country  |
| United Kingdom   |
| Postcode   |
| TR276AA  |
|  |
| Are you an agent acting on behalf of the applicant?  O Yes |
| ⊗ No   |
| Contact Details  |
| Primary number   |
| **** REDACTED *****  |
|  |

| Secondary number   |
|--|
| Fax number   |
| Email address  |
| ***** REDACTED *****   |
| Description of Proposed Works  |
| Please describe the proposals to alter, extend or demolish the listed building(s)  |
| 2 x windows in the kitchen need to be replaced and 1 in the toilet area The windows have been boarded up for safety and was demanded by the insurance company  |
| Has the development or work already been started without consent?  ○ Yes  ○ No   |
| Listed Building Grading  What is the grading of the listed building (as stated in the list of Buildings of Special Architectural or Historical Interest)?  Onon't know Grade I Grade II* Grade II Is it an ecclesiastical building? Onon't know Yes No |
| Demolition of Listed Building  |
| Does the proposal include the partial or total demolition of a listed building?  ○ Yes  ○ No   |
| Related Proposals  Are there any current applications, previous proposals or demolitions for the site?  Ores No  |
| Insurantia from Linting  |

| Has a Certificate of Immunity from Listing been sought in respect of this building?  O Yes  No   |
|--|
| Listed Building Alterations  Do the proposed works include alterations to a listed building?  ○ Yes ② No   |
| Materials  Does the proposed development require any materials to be used?  ② Yes ○ No  Please provide a description of existing and proposed materials and finishes to be used (including type, colour and name for each material) demolition excluded  Type: Windows Existing materials and finishes: Box frame windows finished with white paint Proposed materials and finishes: Replacing like for like  Are you supplying additional information on submitted plans, drawings or a design and access statement? ○ Yes ○ No |
| Neighbour and Community Consultation  Have you consulted your neighbours or the local community about the proposal?  ○ Yes ② No  |
| Site Visit  Can the site be seen from a public road, public footpath, bridleway or other public land?  ② Yes  ○ No  If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?  ○ The agent  ② The applicant  ○ Other person  |

| Pre-application Advice  Has assistance or prior advice been sought from the local authority about this application?  ○ Yes ② No  |
|--|
|  |
| Authority Employee/Member  |
| With respect to the Authority, is the applicant and/or agent one of the following:  (a) a member of staff  (b) an elected member  (c) related to a member of staff  (d) related to an elected member   |
| It is an important principle of decision-making that the process is open and transparent.  |
| For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the Local Planning Authority.  |
| Do any of the above statements apply?  ○ Yes  ⊙ No   |
|  |
| Ownership Certificates   |
| Certificates under Regulation 6 - Planning (Listed Buildings and Conservation Areas) Regulations 1990  |
| Please answer the following questions to determine which Certificate of Ownership you need to complete: A, B, C or D.  |
| Is the applicant the sole owner of <b>all</b> the land to which this application relates; <b>and</b> has the applicant been the sole owner for more than 21 days?  O Yes  No   |
| If No, can you give appropriate notice to all the other owners?  ⊘ Yes ○ No  |
| Certificate Of Ownership - Certificate B   |
| 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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which this application relates. |
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| Owner   | _ |
|---|---|
|   |   |
| Name of Owner: ***** REDACTED ******  |   |
| House name: Leedstown Methodist Church  |   |
| Number:   |   |
| Suffix:   |   |
| Address line 1:   |   |
| Address Line 2: Leedstown   |   |
| Town/City: Hayle  |   |
| Postcode: TR27 6BD  |   |
| Date notice served (DD/MM/YYYY): 16/10/2023   |   |
| Person Family Name:   |   |
|   |   |
| Person Role   |   |
|   |   |
| ○ The Agent   |   |
| Title   |   |
|   |   |
| First Name  |   |
| Ruth  |   |
| Surname   | _ |
| Williams  |   |
| Declaration Date  | _ |
| 16/10/2023  |   |
| ✓ Declaration made  |   |
|   |   |
|   | = |
| Declaration   | _ |
| I/We hereby apply for Listed building consent as described in the questions answered, details provided, and the accompanying plans/drawings and additional information.  I/We confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. |   |
| I/We also accept that, in accordance with the Planning Portal's terms and conditions:  - Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of   |   |

- a public register and on the authority's website;
- Our system will automatically generate and send you emails in regard to the submission of this application.

| Signed        |  |  |  |
|---------------|--|--|--|
| Ruth Williams |  |  |  |
| ate           |  |  |  |
| 08/03/2024    |  |  |  |
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