



## Application for listed building consent for alterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas) Act 1990

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This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

## **Local Planning Authority details:**



The Market Hall Market Place Whitehaven Curnbria CA28 7JG Telephone 0300 373 3730 cumberland.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applica	ant Name and Address
Title:	First name: Goldon
Last name:	OSBALDESTIN
Company (optional):	DIV GOD AMP GOD UCD
Unit:	House number: 10-12 House suffix:
House name:	LOW THER STREET
Address 1:	
Address 2:	
Address 3:	
Town:	WHITEHAVEN
County:	
Country:	
Postcode:	CA 28 7AL

2. Agent	Name and Address				
Title:	First name: MICHAEL				
Last name:	banjon				
Company (optional):	ban cumming up				
Unit:	House number: House suffix:				
House name:	conteranto business facil				
Address 1:	LAMPLYON ROAD				
Address 2:					
Address 3:					
Town:	combenony				
County:					
Country:					
Postcode:	cars ort				

Version 2018.1

3. Description of Pr	-					
Please describe the prop	osals to alter, extend o	or demolish the list	ed building(s):			
la Proper a		C	A N. a		Rm A	مسد
H	lation of	SOCKE	PU PAN	els lo	KERN	ROOF
ARES	۲.					
Has the work already star	rted without consent?	Yes UN	0			
If Yes, please state when	the work was started (	DD/MM/YYYY):				
	·	-	ate must be pre-ap	plication submiss	ion)	
Has the work been comp	leted without consent	? Yes	No		1	
If Yes, please state the da	ite when the work was	completed (DD/M				
			(date mu	st be pre-applicat	tion <b>submis</b> sion)	
4. Site Address De		-Usatian sita				
Please provide the full p Unit:	ostal address of the ap	House	10.10		House	
House	<b>**</b> N. 11	number:	10-12		suffix:	
name:		AND SON	5 676			
Address 1: Low	174th stre	<b>E</b> 1				
Address 3:						
	1 (E HAVIEN)					
County: CA	28 7 DV.					
(optional):  Description of location	or a grid reference.					
(must be completed if p	ostcode is not known)	:	Nowhiam			
Easting: Description:			Northing:			
		1 a0 se ii a a \$	ر . در. م <u>ر</u>			
Exis	TING DEP	ek tivven	1 STARE			

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?
		Tarres   No
If Yes please describe and include the planning appli reference number(s), if known:	cation	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
December 1997	Reference	application more efficiently). Please tick if the full contact details are not
Description	number	known, and then complete as much as possible:
		Officer name:
		Nicel Hayturs
		Reference:
		Date (DD/MM/YYYY):
		(must be pre-application submission)
		Details of pre-application advice received?
		LBC APPLICATION REQUIRED
		The state of the s
7. Neighbour and Community Consultatio		
Have you consulted your neighbours or the local com	munity about th	ne proposal? Yes Ju6
If Yes, please provide details:		
8. Authority Employee / Member		
It is an important principle of decision-making that the	hat a fair-minde	n and transparent. For the purposes of this question, "related to" ed and informed observer, having considered the facts, would
Do any of the following statements apply to you and/o		
Do any of the following statements apply to you and/	n aneitt [ ] is	(a) a member of staff
		(b) an elected member (c) related to a member of staff
		(d) related to a member of stan
If Yes, please provide details of their name, role and h	ow you are rela	• •

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls				
Roof covering	METER PROFILE	METAL PROFILE		
Chimney				
Windows				
External doors				
Ceilings				
Internal walls				
Floors				
Internal doors				
Rainwater goods				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting				
Others (add description)		GOLAR PU PANTES FIXED TO ROOF		
	itional information on submitted drawings n(s)/drawing(s) references:	or plans? Yes No		
		HERITAGE STATEMENT		

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building?	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 You	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?
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, celling or floor finishes (e.g. plaster, floorboards)? Yes No
lii) 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):
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	500 BADWING 6002/20
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)  Grade Ecclesiastical Grade	Yes No Don't know  If Yes, please provide the result of the application:
	ii res, piease provide the result of the application.
Grade II* Ecclesiastical Grade II*	
Grade I	
Don't know	

14. Ownership Certificates		
One Certifi Regulation 6 of the certify/ The applicant certifies that on the owner* of any part of the land or building		E A Areas) Regulations 1990 obody except myself/ the applicant was the
* *owner" is a person with a freehold interes	or leasehold interest with at least 7 years left to run	
Signed - Applicant:		Date DD/MM/YYYY):
certify/ The applicant certifies that I have	CERTIFICATE OF OWNERSHIP - CERTIFICATE Planning (Listed Buildings and Conservation at the applicant has given the requisite notice to a tion, was the owner* of any part of the land at or leasehold interest with at least 7 years left to run	Areas) Regulations 1990 everyone else (as listed below) who, on the day or building to which this application relates.
Name of Owner	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
certify/ The applicant certifies that: Neither Certificate A or B can be i	CERTIFICATE OF OWNERSHIP - CERTIFICATION Planning (Listed Buildings and Conservation assued for this application ken to find out the names and addresses of the out that been unable to do so.  It or leasehold interest with at least 7 years left to run	Areas) Regulations 1990 ther owners* of the land or building, or of a
Name of Owner	Address	Date Notice Served
Notice of the application has been publis (circulating in the area where the land is s		ne following date (which must not be earlier 21 days before the date of the application):
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):

14. Ownership Certificates (continued)  CERTIFICATE OF OWNERSHIP - CERTIFICATE D  Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990  ! certify/ The applicant certifies that:  Certificate A cannot be issued for this application  All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* of any part of the land to which this application relates, 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:						
Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):  Signed - Applicant:  Or signed - Agent:  Date DD/MM/YYYY):						
15. Planning Application Requirements - Checklist  Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) 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:  *National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.						
16. Declaration  I/we hereby apply for planning permission/consent as described in this form 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.  Signed - Applicant:  Date (DD/MM/YYYY):  (date cannot be pre-application)						
17. Applicant Contact Details  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):	Telephone numbers  Country code: Netional number:  Country code: Notional number (optional):  Country code: Fax number (optional):					
Email address (optional):						

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? ( <i>Please select only one</i> ) If Other has been selected, please provide:	Agent	Applicant	Other (if different from the agent/applicant's details)
Contact name:	Telephone number	er:	
Email address:			