H16 - 0657-10
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- 9 AUG 2010

FILE COPY

SOUTH HOLLAND DISTRICT COUNCIL

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

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.

Please complete using block capitals and black ink.
It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	
First name:	
Last name:	
Company (optional):	WELLAND & DEEPINGS I.D.B.
Unit:	
House number:	
House suffix:	
House name:	DEEPING HOUSE,
Address 1:	WELLAND TERRACE
Address 2:	
Address 3:	
Town:	SPALDING
County:	LINCS.
Country:	
Postcode:	PE11 2TD.

2. Agent Name and Address

Title:	
First name:	
Last name:	
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	

3. Description of Proposed Work

Please describe the proposals to alter, extend or demolish the listed building(s):

RETENTION OF CEMENT BASED POINTING TO NORTH WALL OF DEPOT

POINTING OF WEST AND SOUTH FACES WITH LIME PUTTY MORTAR (INCLUDING TURNING OF ANY BRICKS WHICH HAVE FAILED)

PAINTING OF NORTH, WEST AND SOUTH FACES WITH A MINERAL BASED PAINT — WHITE

3. Description of Proposed Work (continued)

Has the work already started without consent? ☒ Yes ☐ No

If Yes, please state when the work was started (DD/MM/YYYY): Sept 2019

(date must be pre-application submission)

Has the work been completed without consent? ☐ Yes ☒ No

If Yes, please state the date when the work was completed (DD/MM/YYYY):

(date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: | House suffix:

House name: DEPOT BUILDING

Address 1:

Address 2:

Address 3: PODE HOLE

Town: SPALDING

County:

Postcode (optional): PE11 3LL

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: 52134 Northing: 32202

Description:

BUILDING USED AS OFFICE, STORES AND WORKSHOP BY WELLAND & DEEPINGS INTERNAL DRAINAGE BOARD.

5. Related Proposals

Are there any current applications, previous proposals or demolitions for the site? ☐ Yes ☒ No

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? ☒ Yes ☐ No

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: MR CHRIS CREW

Reference:

Date (DD/MM/YYYY): 4/08/2010
(must be pre-application submission)

Details of pre-application advice received?

SITE MEETING WITH MR CREW, APPLICATION FOLLOWS ADVICE GIVEN.

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☒ No

If Yes, please provide details:

8. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the council? ☐ Yes ☒ No

If Yes, please provide details:

9. Materials

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls	CEMENT BASED MORTARS IN NORTH WALL OPEN BRICKWORK JOINTS	LEAVE POINT WITH LIME PUTTY MORTAR	☐	☐
~~Roof covering~~	FAILED BRICKS EXPOSED BRICKWORK - NORTH	TURN FOR NEW FACE	☒	☐
~~Chimney~~	WEST AND SOUTH FACES	PAINT WITH MINERAL BASED PAINT	☒	☐
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)			☒	☐

Are you supplying additional information on submitted drawings or plans? ☐ Yes ☐ No

If Yes, please state plan(s)/drawing(s) references:

LIME PUTTY MORTAR - 1pt LIME 3pts SAND (SAND TO CONTAIN AGGREGATE TO MATCH EXISTING MORTAR ON EAST WALL).

MINERAL PAINT - TYNAWR - BEECKOSIL - WHITE

10. Demolition

Does the proposal include the partial or total demolition of a listed building? ☐ Yes ☒ No

If Yes, which of the following does the proposal involve?

a) Total demolition of the listed building: ☐ Yes ☐ No

b) Demolition of a building within the curtilage of the listed building: ☐ Yes ☐ No

c) Demolition of a part of the listed building: ☐ Yes ☐ No

If the answer to c) is Yes:

i) What is the total volume of the listed building?(cubic metres)	
ii) What is the volume of the part to be demolished?(cubic metres)	
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:

Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?

11. Listed Building Alterations

Do the proposed works include alterations to a listed building? ☒ Yes ☐ No

If Yes, do the proposed works include: (you must answer each of the questions)

a) Works to the interior of the building? ☐ Yes ☒ No

b) Works to the exterior of the building? ☒ Yes ☐ No

c) Works to any structure or object fixed to the property (or buildings within its curtilage internally or externally? ☐ Yes ☒ No

d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? ☐ Yes ☒ No

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):

PHOTOGRAPHS ENCLOSED SHOWING EXISTING WALL DETAILS.

SPECIFICATION SHEETS FOR MINERAL BASED PAINT SYSTEM.

-COLOUR- WHITE

12. Listed Building Grading

Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)

Grade I ☐ Ecclesiastical Grade II ☐

Grade II ☒ Ecclesiastical Grade II* ☐

Grade II* ☐ Don't know ☐

Ecclesiastical Grade I ☐

13. Immunity From Listing

Has a Certificate of Immunity from Listing been sought in respect of this building?

☐ Yes ☒ No ☐ Don't know

If Yes, please provide the result of the application:

14. Certificates

One Certificate A, B, C, or D, must be completed with this application form

CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant 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 the application relates.

Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
		06/08/2010

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

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.

Name of Owner	Address	Date Notice Served

Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I certify/ The applicant certifies that:

§ Neither Certificate A or B can be issued for this application

§ All reasonable steps have been taken to find out the names and addresses of the other owners *(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)* of the land or building, or of a part of it , but I have/ the applicant has been unable to do so.

The steps taken were:

Name of Owner	Address	Date Notice Served

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):	On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):

14. Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

I 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 *(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 to which this application relates, but I have/ the applicant has been unable to do so.

The steps taken were:

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

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 has been submitted.

3 copies of a completed and dated application form: ☒

3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: ☒

3 copies of of other plans and drawings or information necessary to describe the subject of the application: ☒

3 copies of of the completed, dated Ownership Certificate (A, B, C, or D - as applicable): ☒

16. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant: S Rywell

Or signed - Agent:

Date (DD/MM/YYYY): 06/08/2010 (date cannot be pre-application)

17. Applicant Contact Details

Telephone numbers

Country code: 01775 National number: 725861 Extension number:

Country code: Mobile number (optional):

Country code: 01775 Fax number (optional): 767 689

Email address (optional): wellandidb@btconnect.com

18. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile 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? *(Please select only one)* ☐ Agent ☒ Applicant ☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name: STAN RYWELL

Telephone number: 01775 725861

Email address: Wellandidb@btconnect.com