

High Peak Borough Council

working for our community

2. 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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

Please complete using block capitals and black ink.

First name:

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.

Title:

Last name:	DIPPNALL	Last name:	
Company (optional):		Company (optional):	
Unit:	House 3 & House sufflx:	Unit:	House House sufflx:
House name:		House name:	
Address 1:	MARKET STREET	Address 1:	
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	CHAPEL-EN-LE-FRITH	Town:	
County:	DENBYSHIRE	County:	y act 1
Country:	U.K.	Country:	
Postcode:	5K23: OKY	Postcode:	
•	ption of Proposed Work	ı	
Please desc	ribe the proposals to alter, extend or demolish the listed	building(s):	
ENEC	-T EXTERNAL SIGN T	6 Rev	LACE A SIGN PREVIOUSLY
INST	ALLED.		
			·
<u></u>			\$Date:: 2014-02-10 #\$ \$Revision: 5975 \$

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 number: 42 House suffix:
If Yes, please state when the work was started (DD/MM/YYYY):	House Newyse House
New York (DD) (414) 111/j.	Address 1: MARKET STREET
	Address 2: Address 3:
(date must be pre-application submission)	Town: CHAPEL-EN-LE-FRITH
ling the week here	County: DEVLOY SHIRE
Has the work been completed without consent? Yes No	Postcode (optional): SK23 OHY
if Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
(date must be pre-application submission)	
Carried approximation and in addition,	
5. Related Proposals	6 Due constiguidad Advise
Are there any current applications, previous proposals or demolitions for the site? Yes No	6. Pre-application Advice 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
Description Reference number	you were given. (This will help the authority to deal with this application more efficiently).
Rumper	Please tick if the full contact details are not
	known, and then complete as much as possible:
	Officer name:
	Reference:
	Date (DD/MM/YYYY):
T-L	(must be pre-application submission)
	Details of pre-application advice received?
	PLANNING PERMISSION TO
	ENECT SIGN
The state of the s	
7. Neighbour and Community Consultation	8. Authority Employee / Member With respect to the Authority Lam. Do any of these
Have you consulted your neighbours or the local community about the proposal? Yes No	With respect to the Authority, I am: (a) a member of staff (b) an elected member Yes No
If Yes, please provide details:	(c) related to a member of staff (d) related to an elected member
PLANNING OFFICE FOR PERHISSION	If Yes, please provide details of the name, relationship and role
SIGN REPLACES A SIGN PRAVIOUSU	
EYLECTED	

	Existing (where applicable)	Proposed		Not applicable	Don't Know
External walls				Ø	
Roof covering				1	
Chimney	· .:		·, · · .		
Windows					
External doors				Ø	
Cellings					
Internal walls			-	W	
Floors				W	
Internal doors				d	
Rainwater goods				ď	
Boundary treatments (e.g. fences, walls)					
Vehicle access and hard standing	·			Ø	
Lighting				V	
Others (add description)				M	
Are you supplying ad- If Yes, please state pla		plans? Yes	No		
	PROUDED TO PLANNIN	ie, Dept.			

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? Yes
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 No	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?
If the answer to c) is Yes: I) What is the total volume of the listed building?(cubic metres)	c) Works to any structure or object fixed to the property (or buildings within its curtilage) internally or externally? Yes
li) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No
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	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
building you are proposing to demolish:	structural support and state references for the plan(s)/drawing(s):
	Plans and drawings attached.
	Sign is aluminum composita per
	attached photograph. Oval, Sooner
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	300mm to be lung or a black
of the paliangle) and of structure(s))	cost vion sugn brocket 600mm 200m
	The moscinum projection from the Coulding will be Goomen. The sign is not illuminated
	sign is not illuminated
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 one box must be ticked)	Has a Certificate of immunity from Listing been sought in respect of this building?
	Yes No Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Eccleslastical Grade II	
Don't know	

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Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day i days before the date of this application, was the owner' of any part of the land or building to which this application relates. Follower's a person with a freehold interest or lease had interest with acta? years list for trus. Name of Owner Address Date Notice Served Address Date DD/MMYYYY): CHAPLET PLACE CHAPLEL EN LETTH CATE C Regulation of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation of or the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation of or the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation of or the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation of or the Planning (Listed Buildings and Conservation Areas) Regulations 1990 All reasonable steps have been taken to find out the names and addresses of the other owners* 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 On the following date (which must not be earlier than 21 days before the date of the application): On the following date (which must not be earlier than 21 days before the date of the application):	14. Ownership Certificates		
Regulation 5 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 certify/ the applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the winer of any part of the land or building to which the applicant relates. Figure 3 applicant with a freehold Interest or leasehold Interest with at least 7 years left to run. CERTIFICATE OF OWNESSHIP - CERTIFICATE 8 Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNESSHIP - CERTIFICATE 8 Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNESSHIP - CERTIFICATE 8 Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 CERTIFICATE OF OWNESSHIP - CERTIFICATE CONSERVATION AND TO Study of building to which this application relates. Owner's a person with a freehold interest or leasehold interest with at least 7 years left to run. Name of Owner Address Date Of Washington Conservation Areas) Regulations 1990 CERTIFICATE OF OWNESSHIP - CERTIFICATE CONSERVATION CONSERVATI	One Cer		
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Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY):			
Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY):			
	Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
	-		
\$Date:: 2014-02-10 #\$ \$Revision: 5975 \$			

14. Ownership Certificates (continued)	
CERTIFICATE OF OWN	IERSHIP - CERTIFICATE D ngs and Conservation Areas) Regulations 1990
I Certify/ The applicant certifies that:	igs and Conservation Areas) Regulations 1990
 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 is unable to do so.	and to which this application relates, but I have/ the applicant has been
* "owner" is a person with a freehold interest or leasehold interest with a	at least 7 years left to run.
The steps taken were:	
Notice of the application has been published in the following news	Danor On the fell and an also fell all and a second
(circulating in the area where the land is situated):	paper On the following date (which must not be earlier than 21 days before the date of the application):
Signed - Applicant: Or signed	I - Agent: Date DD/MM/YYYY);
	Jacob Dillia III II
15. Planning Application Requirements - Checklist	
Please read the following checklist to make sure you have sent all th	e information in support of your proposal. Fallure to submit all
Information required will result in your application being deemed in the Local Planning Authority has been submitted.	valid. It will not be considered valid until all information required by
·	The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:
The original and 3 copies of a completed and dated application form:	The original and 3 copies of the completed dated
The original and 3 copies of a plan which identifies the	Ownership Certificate (A, B, C, or D - as applicable):
land to which the application relates and drawn to an identified scale and showing the direction of North:	The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details):
	in required (see help text and guidance notes for details);
16. Declaration	\
I/We hereby apply for planning permission/consent as described in t	blustinum and the annual control of the state of the state of
information, I/we confirm that, to the best of my/our knowledge, an	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them.	/ facts stated are true and accurate and any opinions given are the
information, I/we confirm that, to the best of my/our knowledge, an	/ facts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY):
genuine opinions of the person(s) giving them.	/ facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent:	pate (DD/MM/YYYY): Date (DD/MM/YYYY): (date cannot be pre-application)
genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: 17. Applicant Contact Details	Pacts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY): (date cannot be pre-application) 18. Agent Contact Details
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genuine opinions of the person(s) giving them. Signed - Applicant: Country code: National number: Country code: Mobile number (optional): Country code: Frax number (optional): Fmail address (optional): Telephone number: Country code: Mobile number (optional): Fmail address (optional): The planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
Information. I/We confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: - ax number (optional): Fmail address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) if Other has been selected, please provide:	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Agent Applicant Other (if different from the agent/applicant's details)
genuine opinions of the person(s) giving them. Signed - Applicant: Country code: National number: Country code: Mobile number (optional): Country code: Frax number (optional): Fmail address (optional): Telephone number: Country code: Mobile number (optional): Fmail address (optional): The planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Email address (optional): Tother public land? Agent Applicant Other (If different from the
Information. I/We confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: - ax number (optional): Fmail address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) if Other has been selected, please provide:	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Agent Applicant Other (if different from the agent/applicant's details)