



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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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:



Planning Group

South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

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. Applic	ant Name and Address
Title:	MISS First name: AMANDA
Last name:	WILSON
Company (optional):	
Unit:	House 85 House suffix:
House name:	
Address 1:	GREENS PLACE
Address 2:	
Address 3:	
Γown:	SOUTH SHIELDS
Iounty:	TYNE + WEAR
Country:	ENGLAND
ostcode:	NE33 2A Q

2. Agent l	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 P	roposed Work		
Please describe the pro	posals to alter, extend or demolish the listed building(s):		
O REMOVE MORTAR FILLET OU THE GABLE SIDE OF THE ROOF (SOUTH + NORTH PITCHES) AND REPLACE WITH UNDER LEAD SOAKERS, AND FOR			
THE PARAPET	- TO THEN BE CAPPED WITH LEAD, OVER LEAD FLASHING.		
© THE NO.2 TO BG	FITTED WITH VELVE COUSERVATION ROLF VINDOW 134 x 98cm,		
WE ARE CO	RESENCE OF MORTAR FILLETS; DRRENTY UNSURE IF UNDER LEAD STAKERS ARE PRESENT. SER GETTING INTO PROPERTY, WHICH IS A LOT, WE FEEL TITIS IS DOUBTFUL.		
	arted without consent? Yes No		
If Yes, please state when	the work was started (DD/MM/YYYY):		
	(date must be pre-application submission)		
Has the work been com	pleted without consent? Yes X No		
	ate when the work was completed (DD/MM/YYYY):		
	(date must be pre-application submission)		
4. Site Address De	tails		
Please provide the full p	postal address of the application site.		
Unit:	House 85 House suffix:		
House name:	*		
Address 1:	GREENS PLACE		
Address 2:			
Address 3:			
Town:	SOUTH SHIELDS		
County:	TYNE + WEAR		
Postcode (optional):	NE33 2AQ		
Description of location (must be completed if p			
Easting:	Northing:		
Description:			
END OF TER	RACE HOUSE, 4 LEVELS , BUILT APPROX 1842.		
GRADE 2 LISTED. THE TERRACE HAS A POST WAR TERRACE AT			
THE REAR ,	I LEVEL, WHICH HAS A KITCHEN AND BATHROOM WITHIN IT.		

5. Related Proposals Are there any current applications, previous proposals or demolitions for the site? Yes	No 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 appli		
reference number(s), if known:		If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Description	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:
		Reference:
		Date (DD/MM/YYYY); (must be pre-application submission)
		Details of pre-application advice received?
`		
2		
7. Neighbour and Community Consultation	1	
Have you consulted your neighbours or the local comm	nunity about th	e proposal? X Yes No
If Yes, please provide details:		
WELLESLEY COURT MANAGEMEN	T GROU,	P, OF WHICH WE ARE PART,
HAVE BEEN CONSULTED AND	AGRE	EMENT GIVEN FOR THE
HAVE BEEN CONSULTED AND WORK TO BE UNDERTAKE	\sim	
B. Authority Employee / Member		
		and transparent. For the purposes of this question, "related to" d and informed observer, having considered the facts, would
conclude that there was bias on the part of the decision		
Do any of the following statements apply to you and/or	agent? 🔀 Ye	s No With respect to the authority, I am: (a) a member of staff
		(b) an elected member
		(c) related to a member of staff(d) related to an elected member
f Yes, please provide details of their name, role and how	w you are relate	ed to them
I AM THE PARTNER OF	ROB	ANGUS UNO IS CURRENTLY
CHARLES AV STANC - CH	ILDREN	+ FAMILIES SOCIAL CARE.
EMPLOYED BY SIMO	,	

Existing (where appl	icable)	nishes to be used in the building (demolition exclude) Proposed	Not applicable	Don't Know
Roof covering Chimney Windows External doors	- FILLETS, a			
Chimney Windows External doors	- FILLETS. C			
Windows External doors		TO THE ROOF (EAST SIDE) / PARA- PET. UNDER LEAD SOALERS		
External doors		NONE ARE PRESENT.	X	
	5	RANGE) WINDOW FITTED TO NORTH PITCH OF ROOF	X	
Collings		(WHICH CAN NOT BESEEN FROM THE STREET) - 134 - 98cm.	×	
Cellings				
Internal walls			X	
Floors			×	
Internal doors			\boxtimes	
Rainwater goods			×	
Boundary treatments (e.g. fences, walls)			×	
Vehicle access and hard standing			X	
Lighting			×	
Others (add description)			M	
Are you supplying additional informa f Yes, please state plan(s)/drawing(s)		ans? Yes No		,

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?
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? Yes No
If the answer to c) is Yes:	c) Works to any structure or object fixed
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage) internally or externally? Yes No
ii) 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 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)?	
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? No Don't know
Grade Ecclesiastical Grade	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know	

14. Ownership Certificates One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A** 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* of any part of the land or building to which the application relates. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Date DD/MM/YYYY): Or signed - Agent: Signed - Applicant: 14/2021 CERTIFICATE OF OWNERSHIP - CERTIFICATE B 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* of any part of the land or building to which this application relates. *"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Date Notice Served Name of Owner Address Date DD/MM/YYYY): Or signed - Agent: Signed - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE C 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* of the land or building, or of a part of it, 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: Date Notice Served Name of Owner Address On the following date (which must not be earlier Notice of the application has been published in the following newspaper than 21 days before the date of the application): (circulating in the area where the land is situated): Date DD/MM/YYYY): Or signed - Agent: Signed - Applicant:

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	RTIFICATE OF OWN			
	ning (Listed Buildin oplication of find out the names a of any part of the lar	gs and Conserv and addresses of nd to which this	ation Areas) Regulations everyone else who, on the application relates, but I ha	day 21 days before the
Notice of the application has been published in (circulating in the area where the land is situated		aper	On the following date (will than 21 days before the d	hich must not be earlier late of the application):
Signed - Applicant:	Or signed	- Agent		Date DD/MM/YYYY):
зідпеч - дрисанс.	Of Signed	- Agent		Date 35/Min, (111),
15. Planning Application Requiremen	4 40 -			
information required will result in your application the Local Planning Authority (LPA) has been substituted to be application form: The original and 3 copies* of a plan which identified to which the application relates and drawn identified scale and showing the direction of Nor *National legislation specifies that the applicant total of four copies), unless the application is substituted and showing documents in exposure and check your LPA's website for information to the content of the content	mitted. ated fies the to an th: must provide the originality electronic format by general to the control of	The original and information nec The original and Ownership Certi The original and if required (see high or, the LPA indipost (for example	3 copies* of other plans ar essary to describe the subject 3 copies* of the completer ficate (A, B, C, or D - as app 3 copies* of a design and a nelp text and guidance not copies of the form and sup cate that a smaller number e, on a CD, DVD or USB me	ad drawings or ect of the application: d dated blicable): access statement, es for details): porting documents (a of copies is required, mory stick).
16. Declaration I/we hereby apply for planning permission/conse information. I/we confirm that, to the best of my/genuine opinions of the person(s) giving them.	ent as described in th our knowledge, any	is form and the facts stated are	accompanying plans/draw true and accurate and any	ings and additional opinions given are the
Signed - Applicant:	Or signed - Agent:		Date (DD/M	M/YYYY):
The state of the s			12/41	(date cannot be pre-application)
17. Applicant Contact Details		18. Agent (Contact Details	
Telephone numbers		Telephone nu	mbers	
	Extension number:	Country code:		Extension
Country code: National number:	number:	Country code.	National number:	number:
Country code: Mobile number (optional):		Country code	Mobile number (option	al):
Country code: Fax number (optional):		Country code:	Fax number (optional):	
Email address (optional):		Email address	(optional):	

19. Site Visit			
Can the site be seen from a public road, public footpath, bridleway o	r 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) If Other has been selected, please provide:	Agent	X Applicant	Other (if different from the agent/applicant's details)
Contact name:	Telephone number	er:	
Email address:			