LISTED BUILDING/CONSERVATION AREA CONSENT APPLICATION FORM

PLEASE READ ACCOMPANYING NOTES FIRST, THEN COMPLETE THE FORM USING BLOCK CAPITALS



1 Name and address of applicant	**************************************
Name Markhams Garage Ltd	<u></u>
Address Kingsland	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Leominster	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Herefordshire	,
Postcode HR6 9QN	***************************************
Tel. No. 01568 708208	
	5 Type of application
2 Name and address of agent	•
(if applicable)	A. Alterations or extension to a
Name Southgate Associates	B. Demolition of ROSHIRE COUNC
Address The Studio, Sunny Bank	B. Demolition of Physical Projection of the Physical Company of the Physical C
Kingsland	partial demarking a Lister Building (s)
Leominster	C. Demol/hor of partial sted building
Herefordshire Postcode HR6 9SE	in a Conservation Area
Tel No. 01568 708050	D. Variation or deletion of conditions ANNING SERVICES
Contact name Mr C Southgate	deletion of eapoitions.
3 Site address	6 Previous / concurrent applications
Full postal address of the building(s) affected	
Address Markhams Garage	(please tick one box)
Kingsland	A. I have already been granted planning
Leominster	permission for this proposal
Herefordshire Postcode HR6 9QN	B. I have already applied for planning permission for this proposal
4 Prief description of proposed works	If you ticked 'A' or 'B', please state application
4 Brief description of proposed works	reference No
please also complete the detailed description	·
overleaf Demolition of existing workshop	C. I am applying concurrently for planning permission
building and erection of a new	D. Planning permission is not required
single storey workshop building	for proposed works
within same location on site	

	Revised December 2004

NWU8/0437/C

7.	DETAIL ED	DESCRIPTION OF PROPOSED WORKS	•
7:	DEIAILED	DESCRIPTION OF PROPUSED WORKS	š

Please give a full schedule of the works (including <u>fixings, finishes,</u> and <u>materials</u> to be used), and explain <u>why</u> the works are desirable or necessary. Enclose an extra sheet if you need more space.
The existing workshop, being in excess of 40 years old, does not enable adequate operational needs to meet servicing requirements of current vehicles. New equipment requires increased
headroom and plan circulation to meet demands of Health & Safety and this can only be accommodated
within a new structure.
Demolition of the existing inadequate workshop will enable the erection of a new workshop of
increased height to house new, up-to-date equipment, including hoist ramps.
The proposed new building will be of steel framed construction, clad generally in coloured profiled
metal cladding to match the existing MOT bay. The street elevation will be clad in facing brickwork with painted timber at upper level, all to replicate the street elevation of the existing building.
Signed Date 6 February 2008
Applicants are advised that information forming this application may be made available to the public by virtue of the obligations imposed under the Freedom of Information Act 2000 and the Environmental Information Regulations 2004
SUMMARY AND CHECK-LIST
Please tick off each item you are submitting in the appropriate boxes, as they apply to your proposal - you may not need to use them all.
The completed application form, signed and dated at the end.
Your Certificate of Ownership, signed and dated.
6 copies of a site location plan to scale 1:1250 or 1:2500
Drawing no/s 1110/SLP1
6 copies of a block or layout plan to scale 1:500
Drawing no/s 1110/TP10
6 copies of scaled floor plans and elevations for the existing building.
Drawing no/s 1110/TP2
6 copies of scaled floor plans and elevations for the proposed building.
Drawing no/s 1110/TP10
A set of photographs Other supporting items,
documents or letters
If you have had preliminary discussions about this application, please tell us with which Officer:

Leo Planning Surgery 25/1/08 + Mr Mullineux

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PLANNING (LISTED BUILDINGS AND CONSERVATION AREAS) ACT 1990 CERTIFICATE UNDER REGULATION 6

OWNERSHIP INFORMATION CERTIFICATE



CERTIFICATE A	CERTIFICATE B
I certify that:	I certify that:
No person other than myself/the applicant was the owner of any of the building to which the application relates at the beginning of the period of 21 days ending with the date of the accompanying application.	I have/The applicant has given the requisite Notice to everyone else who, on the day 21 days before the date of the accompanying application, was the owner of any part of the land to which the application relates, as listed below.
Signed 6 February 2008	Name of owner
	Address
On behalf ofMarkhams Garage Ltd	Addiess
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Postcode
	Date of service of Notice
	Signed
	/
	Date
	On behalf of
NOTICE FOR SERVICE ON IN PLANNING (LISTED BUILDINGS AND CACT 1990	CONSERVATION AREAS) HEREFORDSHIR
Proposal for demolishing / altering / varying or of TAKE NOTICE that application is being made to Consent / Conservation Area Consent / variation consent.	Herefordshire Council for Listed Building
Address of application property	Description of proposal
***************************************	***************************************
***************************************	***************************************
Name of applicant	
Address	Signed
·······	Date
Postcode	On behalf of

If you wish to make representations about the application, you should make them in writing within 3 weeks of the date of this Notice to: Planning Services, PQ Box 230, Blueschool House, Blueschool Street, Hereford, HR1 2ZB.

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