Worthing Borough Council

Office Use
App WB/ 07/1073/LBC
Date Rc. 16/8/08

Application for Listed Building Consent

Planning (Listed Buildings and Conservation Areas) Act 1990

Please read the notes before you fill in this form.

1 Applicant (in block capitals)

Full Name:	Mr A. Peci
Address (including postcode):	
	c/o Agent
	WITHDRAWN 10.6.08
Phone Numbers	
Home:	
Work:	
Extension:	
Fax Number:	

Agent (if any)

Full Name:	Mr T Mayo
Address (including postcode):	
	50 Parklands Ave
	Goring
	West Sx
	BN12 4NM
Phone Numbers	
Home:	
Work:	07973-317681
Extension:	
Fax Number:	

2 Type of Application

I am applying for Listed Building Consent to:
demolish a listed building — Yes ☐ No ☑

demolish part of a listed building (please see note 4) — Yes ☐ No ☑

I am applying to alter or extend a listed building — Yes ☑ No ☐

I am applying to fix an advertisement or structure to a listed building — Yes ☐ No ☑

I am applying to remove or change a condition on a Listed Building Consent — Yes ☐ No ☑
If "Yes", please give the condition number ☐ and the application number WB/

3 Please give the address of the building this application relates to

Off 9 Mbene Terrace
Worthing
West Sussex BN11 3NR

Do you own or control any land or buildings next to this site? Yes ☑ No ☐
(If "Yes", the land or buildings should be outlined in blue on your plan).

Area of land the application relates to Rear Gdn ☐ square metres or ☐ hectares

4 Please describe the work you want to carry out

FORM NEW BATHROOM WITHIN BEDROOM
REMOVE NON LOAD BEARING WALL TO FORM NEW BEDROOM
RELOCATE DOOR OPENING FOR EXISTING BATHROOM

Are you applying for consent for work already carried out? Yes ☑ No ☐

If "Yes", please tell us:

- the application number of the planning permission for the development; and — WB/
- the date the work was carried out. — PRESENTLY

5 The use of the building

What is the building used for now?

RESIDENTIAL FLATS

If the building is not in use, what was it last used for?

—

What do you plan to use the building for?

—

6 Grants

Have you received a grant for any of the work involved in this application? Yes ☐ No ☑

If "Yes", please tell us who provided the grant and the date you received it.

7 Please enclose four copies of this form and four sets of plans.
Please number your plans and write the numbers and scales against the titles here. (Please see note 7.)

	Plan Number	Scale
Location plan	11,215	1:1250
Block plan	11,215	1:100
Detailed plans	11,215	1:100

8

Signature: [signature] **Date:** 26-4-07

Please print your name: TONY MAID