

North York Moors National Park Authority The Old Vicarage Bondgate Helmsley York YO62 5BP

Telephone: 01439 772700 Email: planning@northyorkmoors.org.uk Website: www.northyorkmoors.org.uk

Application for a non-material amendment following a grant of planning permission.

Town and Country Planning Act 1990

NYMNPA 27 MAR 2019

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.

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:	MR+MB First name:	Title:
Last name:	Simons	Last nam
Company (optional):	1	Company (optional
Unit:	House number: House suffix:	Unit:
House name:	THE OLD MILL	House name:
Address 1:	BROOM HOUSE LANE	Address
Address 2:	ECTON BROCKE	Address
Address 3:		Address
Town:	WHITBY	Town:
County:	NORTH YORKSHURE	County:
Country:	UK	Country:
Postcode:	Y021 10Z	Postcode

2. Agent Nam	e and Address	abs in as wells
Title:	First name:	Parata de contracto de la Segui
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3. Site Ad	ldress Details		} (4. Pre-application Advice		
Please provide the full postal address of the application site.			Has assistance or prior advice been sought fi		
Unit:	House number:	House suffix:	authority about this application?	Yes No	
House name:	THE OLD M	u	If Yes, please complete the following inform you were given. (This will help the authority		
Address 1:			application more efficiently). Please tick if the full contact details are not		
Address 2: ECTON BRIDGE		known, and then complete as much as possi	ible:		
Address 3:			Officer name:		
Town:	A CONTROL OF THE SECOND OF THE		HELEN WEBSTER	ita simate	
County:	W(((1)))		Reference: OLD MILL EGION SLIDGE	3/FL	
Postcode	code Management		Date of advice (DD/MM/YYYY):	7	
(optional): Description	of location or a grid reference	e.		20/03/2019	
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5. Eligib					
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7. Description Of Your Proposal	
Please provide a description of the approved development as shown on date of decision in the sections below. Please also provide the original ap	oplication type:
CONSTRUCTION OF GARDEN ROOM E	KTENSION TO EXISTING GLOAGE
ATTHE OLD MILL BROOM HOUSE LANE	REGION BRIDGE
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Reference number:	Date of decision (DD/MM/YYYY):
NYM/2018/0377/FL	08/08/2018
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') Hoいらご	HOLDER. HEMONICOLOGICO PROPRIO P
For the purpose of calculating fees, which of the following best describe	s the original application type?
	교육 전 취임 인
Householder development: development to an existing dwelling-hou	se or development within its curtilage
Other: anything not covered by the above category	Section 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
8. Non-Material Amendment(s) Sought	Con .
Please describe the non-material amendment(s) you are seeking to mak	Maccino e la le como de la como d
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Are you intending to substitute amended plans or drawings?	Yes No
If Yes, please complete the following:	
Old plan/drawing number(s):	
NUMBER 1	
Number 1 New plan/drawing number(s):	
New plan/drawing number(s):	
New plan/drawing number(s): NUMBER 2	
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9. 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 not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.						
The original and 3 copies of a completed and dated application form:						
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	X					
The correct fee:	团					
10. Declaration I/we hereby apply for planning permission/consent as described in 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:	is form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the Date (DD/MM/YYYY): 25/03/20(9					
11. Applicant Contact Details	12. Agent Contact Details					
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):					
13. 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:	Telephone number:					
Condet name.	receptions manuals					
Email address:						

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