



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

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

Application for Planning Permission. Town and Country Planning 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.

1. Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: MR First name: STEPHEN
Last name:	Last name: BURLEY
Company (optional): 4 GUN ESTATES LLP	Company (optional): R M ENGLISH (YURKSHIRE) LTD
Unit: House House number: suffix:	Unit: 2 House House suffix:
House name: THE OLD LODGE	House name:
Address 1: WIGHILL PARK	Address 1: RAILWAY STREET
Address 2:	Address 2: POCKLINGTON
Address 3:	Address 3:
Town: TADCASTER	Town: YORK
County:	County: EAST RIDING OF YORKSHIRE
Country:	Country:
Postcode: LS24 8BR	Postcode: YO42 202
3. Description of the Proposal	
Please describe the proposed development, including any chan	
100000 00	IRICULTURAL 4 FORESTRY WORK FURTHER AID. ABOVE
NEW TRACKS TO BE MADE WHERE NEEDED TO	PORTICE THE TOTAL
Has the building, work or change of use already started?	Yes No
KV l l-t- (l l l l l l l	140
If Yes, please state the date when building, work or use were started (DD/MM/YYYY):	(date must be pre-application submission)
	Yes No

	ddress Details		5. Pre-application Advice	
	ride the full postal address of the House	application site. House	Has assistance or prior advice been sought authority about this application?	_/ _
Unit:	number:	suffix:		Yes No
House name:	NEWGATE FARM		If Yes, please complete the following inform	
Address 1:	HACKNESS		you were given. (This will help the authority application more efficiently).	
Address 2:		2.00	Please tick if the full contact details are not known, and then complete as much as pos	
Address 3:				noie.
MILLS			Officer name:	
Town:	SCARBOROUGH		ROSIE GEE	
County:		"	Reference:	
Postcode (optional):	Y013 OJU		NYM 2019 0217 AFPP	ų.
Description	n of location or a grid reference. Completed if postcode is not know	/n):	Date (DD/MM/YYYY): (must be pre-application submission)	02/10/19
Easting: Ц	95083 Northing	: 493023	Details of pre-application advice received?	9
Description	า:		FULL PLANNING NEEDED.	
			TOLE PERIMINATING MEEDED.	
1	rian and Vehicle Access, Road	ds and Rights of Way	7) 7. Waste Storage and Collection	
	altered vehicle access proposed he public highway?	Yes No	Do the plans incorporate areas to store and aid the collection of waste?	
	altered pedestrian	162	11	Yes
access prop	osed to or from		If Yes, please provide details:	
the public h	nighway?	Yes No		
	ny new public roads to be ithin the site?	Yes No		
	ny new public			
	ny to be provided djacent to the site?	☐ Yes ☐ No		
	posals require any diversions		Have arrangements been made	
/extinguish	ments and/or rights of way?	☐ Yes	for the separate storage and	
	vered Yes to any of the above que		collection of recyclable waste?	Yes No
details on y	our plans/drawings and state the	e reference of the plan	If Yes, please provide details:	
(S)/Grawing	J2(2)		1	
	ü			
]][
8. Autho	rity Employee / Member			
	ct to the Authority, I am: (a) a me		Do any of these statements apply to you?	Yes No
		lected member ed to a member of staf	f	
		ted to an elected member		
If Yes, pleas	se provide details of the name, re	lationship and role		
1				

j.

*	Existing				95	ble	D- '
	(where applicable)			Proposed		Not applicable	Don' Knov
Walls							
Roof							
Windows							
Doors							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing				STONE (NATURAL WHI	TE GREY)	,	
Lighting				,			
Others (please specify)							
Are you supplying add f Yes, please state refe				/design and access sta	tement? Ye	es 🔽	No
0. Vehicle Parkin	q						
	mation on the existing	and proposed i	number of or	n-site parking spaces:			
Type of Vehic	Φ.	Total xisting	1	proposed (including spaces retained)	Differer in spac		
Cars							
Light goods vehi public carrier veh	cles/						
Motorcycles				30.00		· · · · · · · · · · · · · · · · · · ·	
Disability spac	es						
Cycle spaces							
Other (e.g. Bu							
Other (e.g. Bu	s)						

11. Foul Sewage	
	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of: Mains sewer Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for information as necessary.)
	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
plan(3), arawing(3).	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable	AGRICULTURAL ROADS
likelihood that any important biodiversity or geological	
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	
or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species:	*
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
No	When did this use end (if known)?
TW.	DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development	1-
√ No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
☑ No	to the presence of contamination:
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the	Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character?	4
If Yes to either or both of the above, you may need to provide a full	
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be	
submitted alongside your application. Your local planning	
authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to	
design, demolition and construction - Recommendations'.	

7. Residential Units (Including Conversion) Does your proposal include the gain, loss or change of use of residential units? Tyes No Yes															
	Propos	sed	Hous	ing	*				Existi	ng l	Hous	ing			
Market Housing	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Total	Market Housing	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Tota
Houses					,,	OTHEROWIT	44	Houses					4+	Ulkilowii	43
Flats and maisonettes							£>	Flats and maisonettes							i)
Live-work units							· · ·	Live-work units							2"
Cluster flats							1.7	Cluster flats							d
Sheltered housing							Çest.	Sheltered housing							4
Bedsit/studios							Ť	Bedsit/studios							Ţ
Unknown type						ārs .	9	Unknown type							y
	T	otals	(a+b)) + c +	d+e	+f+g)=	A			otals	(a+b)) + C +	d+e	+f+q)=	E SY
				***************************************							•			.,	***
Social Rented	Not		Numl	per of	Bedr	ooms	Total	Social Rented	Not		Numl	oer of	Bedr	ooms	Tota
	known	_1	2	3	4+	Unknown		Social Kented	known	1	2	3	4+	Unknown	
Houses			-				3.3	Houses							i l
Flats and maisonettes			-				i.	Flats and maisonettes							1.3
Live-work units			ļ				1"	Live-work units							
Cluster flats			-				D)	Cluster flats							4.5
Sheltered housing	Ш						4	Sheltered housing							20
Bedsit/studios						-	A	Bedsit/studios							. i
Unknown type							ý	Unknown type							1.
	T	otals	(a + b) + C +	d+e	+f+g)=	**		T	otals	(a + b) + c +	d+e	+f+g)=	12
	Not Number of Bedrooms Total		Total	Not Number of Bedrooms				T-4-							
Intermediate	Not known	1	2	3	4+	Unknown	TOtal	Intermediate	Not known	1	Numi 2	oer of	Bear 4+	Unknown	Tota
Houses							G	Houses							.71
Flats and maisonettes							80	Flats and maisonettes							5/
Live-work units					,		d.	Live-work units							1.
Cluster flats							1.8	Cluster flats					_		1
Sheltered housing							.,1	Sheltered housing							g."
Bedsit/studios							ĺ	Bedsit/studios							
Unknown type							4	Unknown type							ij.
	T	otals	(a + b) + c +	d+e	+f+g)=	1"		T	otals	(a+b)) + c +	d+e	+f+g)=	6
				9											
Key worker	Not known	1	Numl 2	oer of	Bedr 4+	ooms Unknown	Total	Key worker	Not known	1	Numl				Tota
Houses			2	3	4+	Unknown	i i	Houses	KIIOWII	1	2	3	4+	Unknown	
Flats and maisonettes		-	-				1.	Flats and maisonettes			-	-			4
Live-work units								Live-work units	-						
Cluster flats					-		X.	Cluster flats			-				d
Sheltered housing			-	-		-	14	Sheltered housing							ri
Bedsit/studios			-				Į.	Bedsit/studios	H						3,2
Unknown type			-					Unknown type							-
Jimiowii type		otale	(a + b)) + C +	d+c	+f+g)=	i i	Officiowii type	_	otala	(a + 1	1+ 6 1	. d	+f+g)=	G H
		J (413	- (u C	e i u T	uic	.,				o cais	, u + l	, i c t	ите		L : }
Total proposed i	residen	tial u	ınits	(A +	B + C	+ D) =		Total existing	resider	ntial	units	(E -	+ <i>F</i> + (G + H) =	

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total)

	18. All Types of Development: Non-residential Floorspace						
	ur proposal involve th						No
If yo	u have answered Yes	to the qu	uestion above plea				
Us	se class/type of use	Not	Existing gross internal floorspace (square metres)	Gross interna to be lost by use or der (square r	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Shops						
	Net tradable area	n:					
A2	Financial and professional service	es \Box					
A3	Restaurants and ca	fes					
A4	Drinking establishm	ents 🗌					
A5	Hot food takeawa	ys 🗌				,	
B1 (a)	Office (other than a	A2)					
B1 (b)	Research and development						
B1 (c)	Light industrial						
B2	General industria	1 -				***************************************	,
B8	Storage or distribut	ion [*	
C1	Hotels and halls or residence	of _					
C2	Residential instituti	ons [
D1	Non-residential institutions						
D2	Assembly and leisu	ire [
OTHER							
Please Specify							
Specify	Total						
In add		dential in	estitutions and ho	stals places ad	ditionally ind	icate the loss or gain of r	
11	Type of use Not applical	Exis	ting rooms to be I of use or dem	ost by change	Total room	s proposed (including anges of use)	Net additional rooms
C1	Hotels					unges of use,	
C2	Residential Institutions						
OTHER							
Please Specify							
19. Em	ployment						
	omplete the following	informa	ation regarding en	nplovees:			
			Full-time		-time		al full-time
Exi	sting employees					ec	uivalent
Pro	posed employees						
20. Ho	urs of Opening						
Pleas	e state the hours of c	pening f	or each non-resid	ential use prop	osed:		
	Use	Monda	y to Friday	Saturda	у	Sunday and Bank Holidays	Not known
21. Site	e Area						

Please state the site area in hectares (ha)

22. Industrial or Commercial Proce	sses	and Machine	ry	·		
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:						
Is the proposal a waste management development? Yes No						
If the answer is Yes, please complete the foll	1.00				× .	
	Not applicable	The total capa including engir allowance for tonnes if soli	city of the void in seering surcharge cover or restoration d waste or litres if	and making no on material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)	
Inert landfill						
Non-hazardous landfill						
Hazardous landfill						
Energy from waste incineration						
Other incineration						
Landfill gas generation plant						
Pyrolysis/gasification						
Metal recycling site						
Transfer stations						
Material recovery/recycling facilities (MRFs)			A 2000		8	
Household civic amenity sites						
Open windrow composting						
In-vessel composting						
Anaerobic digestion						
Any combined mechanical, biological and/ or thermal treatment (MBT)					9	
Sewage treatment works	П				· ·	
Other treatment	П					
Recycling facilities construction, demolition	П					
and excavation waste Storage of waste						
Other waste management	Н					
Other developments	H					
Please provide the maximum annual operat	ional	throughput of th	e following wasto	stroams		
Municipal		throughput of th	T Tollowing waste	stiearis.		
Construction, demolition and e	xcav	ation	-			
Commercial and indust						
Hazardous						
If this is a landfill application you will need to planning authority should make clear what	o pro infor	vide further infor mation it requires	mation before you on its website.	ur application can	be determined. Your waste	
23. Hazardous Substances				- a		
Does the proposal involve the use or storage the following materials in the quantities stat			No	Not applicab	ole	
If Yes, please provide the amount of each su	bstar	nce that is involve	d:			
Acrylonitrile (tonnes)	ŀ	Ethylene oxide (to	ennes)		Phosgene (tonnes)	
Ammonia (tonnes)	Hyd	rogen cyanide (to	onnes)	Sul	ohur dioxide (tonnes)	
Bromine (tonnes)	nine (tonnes) Liquid oxygen (t				Flour (tonnes)	
Chlorine (tonnes)	quid	petroleum gas (to	onnes)	Refined	white sugar (tonnes)	
Other:			Other:			
Amount (tonnes):			Amount (ton	nes):		

24. Ownership Certificates				
One Certificate A, B, C, or D, mus Town and Country Planning	CERTIFICAT	E OF OWNERSHIP - CER	ural Holdings Certificate with tl TIFICATE A ngland) Order 2010 Certificate	
I certify/The applicant certifies that o owner (owner is a person with a freeho which the application relates.	n the dav 21 davs be	efore the date of this appli	cation nobody except myself/the	e applicant was the
Signed - Applicant:		Or signed - Agen्रा:		Date (DD/MM/YYYY):
				25/11/19.
Town and Country Planning (I certify/ The applicant certifies that I 21 days before the date of this applic left to run) of any part of the land or b	Development Man have/the applicant ation, was the owne	has given the requisite n	ngland) Order 2010 Certificate of the to everyone else (as listed by	under Article 12
Name of Owner		Address		Date Notice Served
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
у		or signed yigene.		Date (DD/WW/1111).
 Certify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be 	Development Man be issued for this apen taken to find out	oplication the names and addresses	of the other owners (owner is a paiding, or of a part of it, but I have	person with a freehold
			,	
Name of Owner		Address	8	Date Notice Served
			1	
Notice of the application has been p (circulating in the area where the lan	ublished in the follo	wing newspaper	On the following date (which than 21 days before the date	must not be earlier
terreducing in the area where the lan	a is situated).		Tidit 21 days before the date	or the application).
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
3	(*			Jaca (50/1/11/1/)

24. Ownership Certificates (cont		r ouniess:					
 Certify/ The applicant certifies that: Certificate A cannot be issued fo All reasonable steps have been t date of this application, was the of any part of the land to which the land the lan	velopment Manager this application aken to find out the owner (owner is a pe	names and addres	CERTIFICATE D) (England) Order 2010 Certificate sses of everyone else who, on the da d interest or leasehold interest with a applicant has been unable to do so	ay 21 days before the least 7 years left to	he run)		
The steps taken were:				151			
Notice of the application has been public (circulating in the area where the land is	Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): On the following date (which must not be earlier than 21 days before the date of the application):						
Signed - Applicant:	Or	signed - Agent:		Date (DD/MM/Y)	YYY):		
				<u> </u>			
25 Agricultural Land Declaration							
AGRICULTURAL LAND DECLARATION Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 Agricultural Land Declaration - You Must Complete Either A or B (A) None of the land to which the application relates is, or is part of, an agricultural holding.							
Signed - Applicant:		signed - Agent:	ata notang.	Date (DD/MM/Y	YYY):		
				25/11/19.	•		
(B) I have/ The applicant has given the re before the date of this application, was a as listed below:	(B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates,						
Name of Tenant		Addr	ess	Date Notice Serv	/ed		
		3					
	,						
Signed - Applicant:	Or	r signed - Agent:		Date (DD/MM/Y	VVV)·		
Jighted Applicants		i signed Agent.			111).		
26. Planning Application Requi	rements - Check	list					
Please read the following checklist to ma information required will result in your a the Local Planning Authority has been su	ke sure you have ser oplication being dee	nt all the informati			l by		
The original and 3 copies of a completed application form:		The c	orrect fee:				
The original and 3 copies of the plan whi the land to which the application relates	ch identifies		riginal and 3 copies of a design and uired (see help text and guidance n				
identified scale and showing the direction	n of North:	The o	riginal and 3 copies of the completership Certificate (A, B, C, or D - as a	ed, dated pplicable):			
The original and 3 copies of other plans and drawings or nformation necessary to describe the subject of the application: The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):							

27. 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	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - Age	Date (DD/MM/YYYY):
		25/11/19 (date cannot be pre-application)
28. Applicant Contact Details		29. Agent Contact Details
Telephone numbers		Telephone numbers
Country code: National number:	Extension number:	Country code: National number: Extension number:
Country code: Mobile number (optional):		Country code: Mobile number (optional):
Country code: Fax number (optional):		Country code: Fax number (optional):
Email address (optional):		Email address (optional):
		,
30. Site Visit		
Can the site be seen from a public road, public fo	ootpath, bridleway or	r other public land? Yes No
If the planning authority needs to make an appoor out a site visit, whom should they contact? (Please	intment to carry se select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:		agent applicants details,
Contact name:		Telephone number:
		*
Email address:		

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