

NYMNPA 19/10/2020 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 listed building consent for alterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

'ublication of applications on planning authority websites

lease 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.

lease complete using block capitals and black ink.

is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applic	ant Name and Address	2. Agent Name and Address
Title:	MRS First name: SANDRA	Title: First name:
Last name:	Woods	Last name:
Company (optional):		Company (optional):
Unit:	House House suffix:	Unit: House suffix:
House name:		House name:
Address 1:	35, YORK PRACE	Address 1:
Address 2:		Address 2:
Address 3:		Address 3:
Town:	HARROGATE	Town:
County:	NORTH YORKSHIRE	County:
Country:	UNITED KINGDOM	Country:
Postcode:	HGI SRH	Postcode:
3. Descrip	otion of Proposed Work	

Please describe the proposals to alter, extend or demolish the listed building(s):

	WORK	IN	693	thu ki	vr	KITCHE	en a	dut	To	DAA	APNES.	5
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THEN REPLASTER;
· WOODEN STAIRS TO BE REMOVED DURING WORK AND
THEN PUT BACK IN PLACE.

Séé ATTACHED:

PRE PLANNING ÉNQUILY WITH

CLAIR SHIELDS

YOUR REF: NYM/2020/ENQ/

16354.

AND RELATED CORRESBNOENCE

3. Description of Proposed work (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
las the work already started without consent? Yes No	Unit: House House suffix:
f Yes, please state when the work was started (DD/MM/YYYY): AS A GALLO WIM NYMNPA TO STALT IN:	House name:
AS AGREED WITH NYMNPA TO START ON:	Address 1: WESKY GTAGE,
09/11/2020.	Address 2.
	Address 3:
date must be pre-application submission)	Town: Robin 4008'S BAY
Has the work been completed without consent? Yes ✓ No	County: NORTY YORKSHIRE Postcode Valor 100
	(optional): YO ZZ HKX Description of location or a grid reference.
f Yes, please state the date when the work was completed (DD/MM/YYYY):	(must be completed if postcode is not known): Easting: Northing:
	Description:
date must be pre-application submission)	
5. Related Proposals	6 Dre application Advise
Are there any current applications, previous proposals or demolitions for the site? Yes No	6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No
If Yes please describe and include the planning application reference number(s), if known:	If Yes, please complete the following information about the advice
Description Reference number	you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not
	known, and then complete as much as possible:
	Officer name: CLAIR SHIELDS
	Reference:
	NYM 2020 ENQ 16354
	Date (DD/MM/YYYY): (must be pre-application submission) 27/02/2020
	Details of pre-application advice received?
	SEE ATTACHED CORRESPONDENCE.
7. Neighbour and Community Consultation	8. Authority Employee / Member
Have you consulted your neighbours or	With respect to the Authority, I am: Do any of these
:he local community about the proposal? Yes No	(a) a member of staff statements apply to you?
If Yes, please provide details:	(c) related to a member of staff (d) related to an elected member
	If Yes, please provide details of the name, relationship and role
	I I

9. Materials

lease provide a description of existing and proposed materials and finishes to be used in the building	(demolition excluded):
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	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls			V	
Roof covering			V	
Chimney			✓	
Windows			~	
External doors			V	
Ceilings			\checkmark	
Internal walls	ORDINARY PASTER (VERY DAMP) IN BASELIENT KITCHEN	LIME MEX PLASTER (AS APPLIED. BY NYMNPA) TO BE APPLIED.		
Floors			1	
Internal doors				
Rainwater goods			~	
Boundary treatments (e.g. fences, walls)			V	
Vehicle access and hard standing			V	
Lighting		A	V	
Others (add description)	PARS OF EXISTING STAIRS TO 6 WORK AND THENPUT BA	REDVED DYNING ACK IN PLACE		
Are you supplying addit f Yes, please state plan(tional information on submitted drawings or plan s)/drawing(s) references:	s? Yes No		

10. Demolition			11. Listed	Buildi	ng Alteration	ıs	
Does the proposal include the partial otal demolition of a listed building?	or Yes	✓ No	Do the propo to a listed bu		ks include altera	tions Yes	No
f Yes, which of the following does the	e proposal involve?		If Yes, do the	propose	d works include:		
a) Total demolition of the listed build	ing: Yes	No	(you must an	swer eac	h of the question	ns)	
Demolition of a building within the curtilage of the listed building:	Yes	No	a) Works to the	ne interio	or of the building	g? ✓ Yes	No
c) Demolition of a part of the listed bu	uilding: Yes	☐ No	b) Works to t	ne exteri	or of the building	g? Yes	No
If the answer to c) is Yes:			c) Works to a	ny struct	ure or object fixe	ed	
i) What is the total volume of the listed building?(cubic metres)					ildings within or externally?	Yes	No
ii) What is the volume of the part to be demolished?(cubic metres)					y internal wall, ce laster, floorboar		☐ No
iii) What was the (approximate) date erection of the part to be removed? (date must be pre-application submit	(MM/YYYY) ssion)	nut of the	plans, drawii extent and c	ngs, phot haracter	ographs sufficie of the items to b	is is Yes, please pr int to identify the pe removed, and t ling any new mea	location, he
building you are proposing to demol	ish:	art or the	structural su	oport an	d state reference	es for the plan(s)/o	drawing(s):
			SKE	PRE	APPRECAT	NOW EQUIR	Y
		-		NYM	2020/ENG	in Equia 2/16354 TACYED.	
				20	Aimus Az	racus)	
Why is it necessary to demolish or ex	tend (as applicable)	all or part			Odinies di	rogro.	
of the building(s) and or structure(s)?							
12. Listed Building Grading			13. Immui	nity Fro	m Listina		
Please state the grading (if known) of	the building in the I	ist of			1000	ing been sought i	n respect of
Buildings of Special Architectural or H	istoric interest? (No	te: only	this building?		mariley morn Lise	ing been sought	ii respect o
one box must be ticked)			Yes		√ No	Don't kno	ow
Grade I	Ecclesiastical Grad	de I	If Yes, please	provide	the result of the	application:	
Grade II*	Ecclesiastical Grade	× ×					
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Grade II	Ecclesiastical Grad						
Grade II 🗹		le II					
Grade II ▼	Ecclesiastical Grad	le II					
Grade II ▼	Ecclesiastical Grad	le II					,

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Certificate under 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 (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

Signed - Applicant:		Or signed - Agent:		
_				17/10/2020
Certificate under Regular Certify/ The applicant certifies that 21 days before the date of this applicant to run) of any part of the land or	ulation 6 of the Planni t I have/the applicant h ication, was the owner	has given the requisite n	od Concorrection Avenal Beaute	itions 1990 below) who, on the day erest with at least 7 year.
Name of Owner		Address		Date Notice Served
		(A)		
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
been unable to do so. The steps taken were:			Iding, or of a part of it, but I hav	o, and approximating
Name of Owner		Address		Date Notice Served
		_/		
Notice of the application has been p (circulating in the area where the law	published in the following is situated):	ng newspaper	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:	(Or signed - Agent:		Date DD/MM/YYYY):

14. Certificates (continued)				
Certificate under Regulation 6 of the Plan I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out date of this application, was the owner (owner is of any part of the land to which this application)	nning (Listed n t the names a a person wit	and addresses of every	onservation Areas) Regul veryone else who, on the d	ay 21 days before the
The steps taken were:				
Notice of the application has been published in the	/			
Notice of the application has been published in the followal (circulating in the area where the land is situated):	wing newsp		On the following date (whic han 21 days before the dat	th must not be earlier e of the application):
Signed - Applicant:	Or signed	- Agent:		Date DD/MM/YYYY):
The original and 3 copies of a plan which identifies the and to which the application relates and drawn to an dentified scale and showing the direction of North: 16. Declaration /we hereby apply for planning permission/consent as denformation. I/we confirm that, to the best of my/our known genuine opinions of the person(s) giving them.	deemed inv	ralid. It will not be of the original and 3 of information necess. The original and 3 of Ownership Certifica. The original and 3 of if required (see helphis form and the accounts form and the accounts of th	considered valid until all in copies of other plans and d sary to describe the subject copies of the completed date (A, B, C, or D - as applic copies of a design and accept text and guidance notes of the companying plans/drawing	drawings or tof the application: ated able): ass statement, for details): ass and additional inions given are the
17. Applicant Contact Details	$\overline{}$	18. Agent Co		
	o carry	Telephone number Country code: Country code: Country code: Email address (on the public land? Agent Telephone number country code:	National number: Mobile number (optional): Fax pumber (optional): ptional): Yes	Extension number: : : : : : : : : : : : : : : : : : :
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Email address:			The state of the s	