



NYMNPA 13/10/2021

Householder Application for Planning Permission for works or extension to a dwelling Town and Country Planning Act 1990

rivacy Notice

is form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting formation to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning evelopment Management Procedure) (England) Order 2015 (as amended)'.

ease be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Ar brequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in reement with the declaration section.

oon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of their sligations in regards to the processing of your application. Please refer to their website for further information on any legal, regulatory as mmercial requirements relating to information security and data protection of the information you have provided.

ocal Planning Authority details:



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

ablication on Local Planning Authority websites

formation provided on this form and in supporting documents may be published on the authority's planning register and ebsite.

ease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require y further clarification, please contact the authority directly.

printed, please complete using block capitals and black ink.

s important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your plication.

pilcation.	·				
. Applicant Name and Address		2. Agent Name and Address			
itle:	MR. First name: M	Title: MR First name: W			
ast name:	HALL	Last name: HENDERSON			
ompany optional):	·	Company (optional): SPECTRUM DESIGN			
ınit:	House House suffix:	Unit: House number: 12 House suffix:			
louse ame:	CAWOOD COTTAGE	House name:			
ddress 1:	STAINTONDALE ROAD	Address 1: WILLOW CLOSE			
ddress 2:		Address 2:			
ddress 3:		Address 3:			
own:	CLOUGH TON	Town: SALTBURN			
ounty:	N. YORKS	County: CLEVELAND			
ountry:		Country:			
ostcode:	YOI3 OAX	Postcode: TSIZ IPB.			

. Description of Proposed Works	
lease describe the proposed works:	
Replacement side conservatory roof a	and windows and the installation
Replacement side conservatory roof, as	
as the work already started? Yes	Í No
Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission
as the work already been completed?	No
Yes, please state when the work was completed (DD/MM/YYY	YY): (date must be pre-application submission)
ease provide the full postal address of the application site. House number: House suffix:	5. Pedestrian and Vehicle Access, Roads and Rights of W Is a new or altered vehicle access proposed to or from the public highway? Yes N Is a new or altered pedestrian access proposed to or from the public highway? Yes N
ddress 1: STAINTOND ALE ROAD	Do the proposals require any diversions, extinguishments and/or creation of public
ddress 2:	rights of way? Yes N If Yes to any questions, please show details on your plans or
.ddress 3:	drawings and state the reference number(s) of the plan(s)/drawing(s):
own: CLOUGHTON	
ounty: N. YORKS	
ostcode potional): Yol3 OAx	
. Pre-application Advice	7. Trees and Hedges
Yes, please complete the following information about the advou were given. (This will help the authority to deal with this oplication more efficiently).	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
ease tick if the full contact details are not nown, and then complete as much possible: Officer name:	
L. GIBSON / J. BASTOW	
!eference:	
Date (DD MM YYYY): nust be pre-application submission) Details of the pre-application advice received: Planning permission is required A Further dirumning by the application in the product of the pre-application in the product of the pre-application in the product of the	Will any trees or hedges need to be removed or pruned in order to carry out your proposal? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s drawing(s) and indicate the scale.
J. Baston indicated that the material changes may be more forwardly broked upto as the proposal part state roof leaving is more in keeping with the man dividing.	

/ill the proposed work	ss affect existing car parking arrangements?	Yes N	0	•	
Yes, please describe:			<u> </u>		
		1			
ieans related, by birth	oyee / Member ple of decision-making that the process is open an or otherwise, closely enough that a fair minded an s bias on the part of the decision-maker in the loca	nd informed obs	server, having considered the facts		
	statements apply to you and/or agent? Yes	No No	With respect to the authority, I a (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected membe		
Yes, please provide o	letails of their name, role and how you are related t	to them.			
O. Materials applicable, please sta	te what materials are to be used externally. Includ	e type, colour a	nd name for each material:		
	Existing (where applicable)	Proposed		Not applicable	Don' Knov
Nalls					
Roof	GLAZED CONSERVATORY COOF		LATE FINISH (ULTER TILE BY / PART UPVC GLAZED		
Nindows	PAINTED TIMBER CONSERVATORY	I	VOOD GRAN EFFET (MATT) ONSURVATORY WINDOWS		
Joors					
3oundary treatments e.g. fences, walls)					

			lude type, colour and name for ea		1	
				A ₂		
'ehicle access and ard-standing						
ighting						
	N/A.		WOOD BURNING S	rove flue		
Others please specify)			MATT BLACK FINIS	H		
				,		
re you supplying add	litional information on sub	mitted plan(s)/drawin	g(s)/design and access statemen	t? 📝 Yes		N
Yes, please state refe	rences for the plan(s)/drav	ving(s)/design and acc	cess statement:			
SITE LOCAT	on proposed	PLAN & ELEVAT	TIONS SHEETZ.			

1. Ownership Certificates and Agricultural Land Declaration

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

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the wner * of any part of the land or building to which the application relates, and that none of the land to which the application relates is, o part of, an agricultural holding**

OTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the pplication relates but the land is, or is part of, an agricultural holding.

"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

* "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.

igned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY
		13/10/21
oplication relates. "owner" is a person with a freehold intere	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2 ve/the applicant has given the requisite notice to everyor on, was the owner* and/or agricultural tenant** of any past or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 1	part of the land or building to which th
Name of Owner / Agricultural Tenant	Address	Date Notice Served
igned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)

1. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 :ertify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were: Name of Owner / Agricultural Tenant **Date Notice Served** Address Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYY) CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Mánagement Procedure) (England) Order 2015 Certificate under Article 14 ertify/ The applicant certifies that:

Certificate A cannot be issued for this application

All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner and/or agricultural tenant to the land to which this application relates, but have/ the applicant has been unable to do so.

'owner" is a person with a freehold interest of leasehold interest with at least 7 years left to run. "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 ne steps taken were:

otice of the application has been publi rculating in the area where the land is	shed in the following newspaper situated):	On the following date (which must not be earlier than 21 days before the date of the application):
gned - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY

ease read the following checklist to make sure formation required will result in your application to Local Planning Authority (LPA) has been sub-	you have sent all the on being deemed inv mitted.	/alid. It will not be	considered	valid until all inform	nation required	,
ne original and 3 copies* of a pmpleted and dated application form:	The original and 3 or design and access :	statement if	The co	orrect fee: $ kz \propto . \sigma $	o to Follow	
ne original and 3 copies* of a plan which lentifies the land to which the application lates drawn to an identified scale nd showing the direction of North: ne original and 3 copies* of other plans nd drawings or information necessary to escribe the subject of the application:	proposed works fal conservation area o World Heritage Site Listed Building:	or	comp Certifi applic	riginal and 3 copies leted, dated Owner cate (A, B, C or D – a able) and Article 14 cate (Agricultural H	rship as I	·
National legislation specifies that the applicant stal of four copies), unless the application is sub PAs may also accept supporting documents in eou can check your LPA's website for information	must provide the or mitted electronically electronic format by n or contact their pla	iginal plus three co or, the LPA indica post (for example, nning department	opies of the f ite that a sma on a CD, DVI to discuss th	orm and supporting aller number of cop or USB memory stress options.	g documents (les is required lick).	(a
3. Declaration						
we hereby apply for planning permission/conse formation. I/we confirm that, to the best of my/ enuine opinions of the person(s) giving them.	ent as described in the our knowledge, any	nis form and the ac facts stated are tru	companying ue and accur	plans/drawings an ate and any opinior	d additional 1s given are th	е
igned - Applicant:	Or signed - Agent:			Date (DD/MM/YYY	Y):	
				13/10/21	(date canr pre-applic	
4. Applicant Contact Details		15. Agent Co	ntact Det	ails		=
elephone numbers		Telephone num				
ountry code: National number:	Extension number:	Country code:	National nu	ımber:	Exten numb	
Country code: Mobile number (optional):		Country code:	Mobile nun	nber (optional):		
Fax number (optional):		Country code:	Fax numbe	r (optional):		
mail address (optional):		Email address (o	ptional):			
<u> </u>						
6. Site Visit						
an the site be seen from a public road, public foo	otpath, bridleway or	other public land?	√ Yes	No		
the planning authority needs to make an appoin ut a site visit, whom should they contact? <i>(Please</i> Other has been selected, please provide:	ntment to carry	Agent	Applic	 cant	different from pplicant's deta	
ontact name:		Telephone numb	er:			
		,				
mail address:						
	 					