



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

Publication of applications on planning authority websites

JEAN)

16

House

suffix:

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.

First name:

1. Applicant Name and Address

UTIER

House

number:

Title:

Last name:

Company

Unit:

House

(optional):

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

Title:

Last name:

Company

(optional):

Unit:

2. Agent Name and Address

First name:

House

suffix:

House

number:

name:		name:
Address 1:	BLACKBURN AUGNUE	Address 1:
Address 2:		Address 2:
Address 3:		Address 3:
Town:	BROUGH	Town:
County:	EAST YORKSHIPE	County:
Country:		Country:
Postcode:	HUIS IBD	Postcode:
3. Descrip	otion of Proposed Work	
Please desci	ribe the proposals to alter, extend or demolish the listed	building(s):
Messa		OD SINGLE CLAZED WINDOWS
AT TH	E REAR OF THE PROPERTY W	DITH WOOD DOUBLE GLAZED.
REPLAC	E THE WOOD DOOR WITH	A NEW WOOD DOOR
FITA	VENTED ROOF THE IN T	HE KITCHEN ROOF FOR AN
	ACTOR FAN.	
		SDate:: 2012-07-17 #S SRevision: 4636 S

3. Description of Proposed Work (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
Has the work already started without consent?	Unit: House House suffix:
If Yes, please state when the	House ROSEALE COTTACE
work was started (DD/MM/YYYY):	Address 1: THE ROW
	Address 2: I BURN DALE
	Address 3:
(date must be pre-application submission)	Town: WHITBY
Has the work been	County: N YORKSHIRE
completed without consent? Yes No	Postcode (optional): YOZZ SDT
If Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
4	
(date must be pre-application submission)	
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site? Yes No	Has assistance or prior advice been sought from the local
	authority about this application?
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	you were given. (This will help the authority to deal with this
number	application more efficiently). Please tick if the full contact details are not
	known, and then complete as much as possible:
	Officer name: MISS KELSEY BLAIN
	Reference:
	NYM 2021 ENQ 17737
	Date (DD/MM/YYYY):
· ·	(must be pre-application submission) Details of pre-application advice received?
	THE USE OF DOUBLE GLAZED TIMBER
	WINDOWS + DOORS WOOLD LIKELY
	TO RECEIVE FAVOURABLE
	CONSIDERATION
7. Neighbour and Community Consultation	Q Asthonity Employee / March
lave you consulted your neighbours or	8. Authority Employee / Member With respect to the Authority, I am: Do any of these
he local community about the proposal?	(a) a member of staff statements apply to you?
If Yes, please provide details:	(b) an elected member (c) related to a member of staff (d) related to an elected member.
VERBALY TOLD THE NEIGHBOURS WHAT	(d) related to an elected member
I WAS WANTING TO DO.	If Yes, please provide details of the name, relationship and role
THEY HAD NO OBJECTIONS	

	Existing (where applicable)	Proposed	Not applicable	Don Know
External walls			Ø	
Roof covering			Ø	
Chimney			0	
Windows	REAR BATHROOM + SUN ROOM WINDOWS - WOOD - PAINTED WHITE-SINGLE GLAZED	MOODEN DOUBLE GLAZED PAINTED WHITE		
External doors	REAR DOOR - WOOD - PAINTED WHITE	REAR DOOR - WOOD, PAINTED - NO LETTER BOX		
Ceilings			Ø	
Internal walls			1	
Floors			4	
nternal doors			ď	
Rainwater goods			Ø	
Boundary treatments e.g. fences, walls)			Ø	
/ehicle access and nard standing			Ø	
ighting			Ø	
Others add description)		VENTED CLAY PANTILE TO FACILITATE AN EXTRACTOR FAN		
re you supplying addit Yes, please state plan(s	ional information on submitted drawings or plan s)/drawing(s) references:	s? Yes No	164	
PHOTOS OF T	HE EXISTING WINDOWS + DO ROPOSED VENTED ROOF TI	DOR LE		

10. Demolition			11. Listed Building Alterations		
Does the proposal include the partial or total demolition of a listed building?	Yes	No	Do the proposed works include alterations to a listed building?	✓ Yes	☐ No
If Yes, which of the following does the propos	al involve?		If Yes, do the proposed works include:	5	
a) Total demolition of the listed building:	☐ Yes	□No	(you must answer each of the questions)		
b) Demolition of a building within the curtilage of the listed building:	☐ Yes	□ No	a) Works to the interior of the building?	Yes	☐ No
c) Demolition of a part of the listed building:	Yes	☐ No	b) Works to the exterior of the building?	✓ Yes	☐ No
If the answer to c) is Yes:			c) Works to any structure or object fixed		
i) What is the total volume of the listed building?(cubic metres)			to the property (or buildings within its curtilage) internally or externally?	Yes	☐ No
ii) What is the volume of the part to be demolished?(cubic metres)			d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?	Yes	□No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYY) (date must be pre-application submission) Please provide a brief description of the bubuilding you are proposing to demolish:		art of the	If the answer to any of these questions is Ye plans, drawings, photographs sufficient to it extent and character of the items to be rem proposal for their replacement, including ar structural support and state references for the structural supports.	dentify the loved, and the lowed, and the lowest mean to the lowest mean mean mean mean mean mean mean mean	ocation, ie is of
Why is it necessary to demolish or extend (as of the building(s) and or structure(s)?	аррисаріе)	all of part			
12. Listed Building Grading			13. Immunity From Listing		
Please state the grading (if known) of the build		1			
Buildings of Special Architectural or Historic in	-		Has a Certificate of Immunity from Listing be this building?	en sought i	
Buildings of Special Architectural or Historic in one box must be ticked)	-	te: only	Has a Certificate of Immunity from Listing be this building?	Don't kno	
Buildings of Special Architectural or Historic in one box must be ticked) Grade I Eccles	terest? (No	te: only	Has a Certificate of Immunity from Listing be this building?	Don't kno	
Buildings of Special Architectural or Historic in one box must be ticked) Grade I Eccles Grade II* Ecclesia	terest? (No	te: only de I	Has a Certificate of Immunity from Listing be this building?	Don't kno	

14. Certificates			
Certificate under Regulati I certify/The applicant certifies that on owner (owner is a person with a freehold	ficate A, B, C, or D, must be comp CERTIFICATE OF OWNERSH on 6 of the Planning (Listed Buil the day 21 days before the date of interest or leasehold interest with	IP - CERTIFICATE A Idings and Conservation A of this application polydy	Areas) Regulations 1990
which the application relates. Signed - Applicant:			5.77745.0000.0000
эідпей - Арріісані.	Or signed - Age	nt:	Date DD/MM/YYYY):
		131	05.12-20
Certificate under Regulation I certify/ The applicant certifies that I have 1 days before the date of this application 1 deft to run) of any part of the land or build	n, was the owner lowner is a perso	dings and Conservation A quisite notice to everyone e	else (as listed below) who on the day
Name of Owner	A	Address	Date Notice Served
Neither Certificate A or B can be i	ken to find out the names and ad-	P - CERTIFICATE C lings and Conservation A	s (owner is a person with a freehold
Name of Owner	Ac	ddress	Date Notice Served
Name of the second seco	, ne	idress	Date Notice Served
lotice of the application has been publish circulating in the area where the land is si	ed in the following newspaper tuated):	On the following than 21 days befo	date (which must not be earlier ore the date of the application):
igned - Applicant:	Orsigned Asset		
упеч - друпсань	Or signed - Agent:		Date DD/MM/YYYY):
	11		

CERTIFICATE OF OW	
Certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the name	VNERSHIP - CERTIFICATE D sted Buildings and Conservation Areas) Regulations 1990 es and addresses of everyone else who, on the day 21 days before the with a freehold interest or leasehold interest with at least 7 years left to run) at 1 have/ the applicant has been unable to do so.
The steps taken were:	
Notice of the application has been published in the following new (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 signe	ed - Agent: Date DD/MM/YYYY):
G. S.	Date DD/MIN//TTT).
Please read the following checklist to make sure you have sent all t information required will result in your application being deemed it 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 a plan which identifies the land to which the application relates and drawn to an identified scale and showing the direction of North:	nvalid. It will not be considered valid until all information required by The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: The original and 3 copies of the completed dated Ownership Certificate (A, B, C, or D - as applicable): The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details):
16. Declaration I/we hereby apply for planning permission/consent as described in	this form and the accompanying plans/drawings and additional
onformation. I/we confirm that, to the best of my/our knowledge, as genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent	ny facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent	Date (DD/MM/YYYY): OS-12-2021 (date cannot be pre-application)
genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent	Date (DD/MM/YYYY): O \leq \cdot \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent 17. Applicant Contact Details Telephone numbers Country code: Mobile number: Country code: Mobile number (optional): Email address (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, bridleway of the planning authority needs to make an appointment to carry but a site visit, whom should they contact? (Please select only one)	Date (DD/MM/YYYY): Date (DD/MM/YYYY): (date cannot be pre-application) 18. Agent Contact Details Extension number: Country code: National number: number: Country code: Mobile number (optional): Email address (optional): Email address (optional): Country code: Applicant Other (if different from the process of