

NYMNPA 09/01/2023 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 approval of details reserved by condition.

Town and Country Planning Act 1990

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

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. Applic	ant Name and Address	2. Agent Name and Address		
Title:	First name:	Title: First name:		
Last name:		Last name: HCKSON		
Company (optional):	HOME OFFICE	Company (optional): GALLOWAY ESTATES LTD		
Unit:	House House suffix:	Unit: House number: House suffix:		
House name:	CLIVE HOUSE (2ND FLOOR)	House name: PO BOX 17086		
Address 1:	70 PETTY FRANCE	Address 1:		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	LONDON	Town: SOLIHULL		
County:	GREATER LONDON	County: W. MIDLANDS		
Country:	ur	Country: UK		
Postcode:	SWIH DEX	Postcode: B91 9UG		

	ddress Details	4. Pre-application Advice				
Please provide the full postal address of the application site. House House			Has assistance or prior advice been sought from the local authority about this application?			
Unit:	number: suffix:	150				
House name:	LAND AT DALBY FOREST		please complete the following information about the advice ere given. (This will help the authority to deal with this			
Address 1:	EAST OF HIGH DALBY HOUSE	application more efficiently). Please tick if the full contact details are not				
Address 2:			n, and then complete as much as possible:			
Address 3:		Office	er name:			
Town:	NR PICKERING	Reference:				
County:	YORKSHIPE	NYM 2021 O485 FL				
Postcode (optional):	Y018 7LP	Date (DD/MM/YYYY):				
Description	n of location or a grid reference. ompleted if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?				
	485708 Northing: 488515	Detail	sorpre application advice received.			
Description						
			And the second s			
			Standing of the property of the standard of th			
5 Doscri	iption Of Your Proposal					
Please pro	vide a description of the approved development as show	on the	decision letter, including the application reference number			
P	of decision in the sections below:	Com	IN PASSED SOLDANIST D. S.			
55	M TOWER ANTENNES, DISHES,	GROU	NO BASED EQUIPMENT INC POLE			
MEUN	IED SATELLITE DISH, GENERATOR, E	NCLOS	URE FOR VISAT AND ACCESS TRACK.			
Reference	number: Nym 2021 0485/FL Date of decision:	26.	8. 2021 (Date must be pre-application			
	te the condition number(s) to which this application relate		submission) (DD/MM/YYYY)			
	CONDITION 5	6.				
2.	CONDITION 6	7.	partie establish diamen			
3.	CONDITION 9	8.				
4.	0,634	9.	Y - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1			
5.		10.				
Has the de	evelopment already started?		Yes No			
If Yes, plea	ase state when the development started (DD/MM/YYYY):		(date must be pre-application submission)			
Has the de	evelopment been completed?		Yes No			
	ase state when the development was completed (DD/MM)	/YYYY): [(date must be pre-application submission)			
	arge Of Condition vide a full description and/or list of the materials/details tl	nat are h	eing submitted for approval:			
	TION - 5 - Email attached detailine					
CONOT	TION - 6 - Letter from Forestry English	, ,				
7. Part D	Pischarge Of Condition(s)					
Are you seeking to discharge only part of a condition? Yes No						
If Yes, please indicate which part of the condition your application relates to:						
	-					

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed inv the Local Planning Authority has been submitted.							
The original and 3 copies of a or information necessary to describe the subject of the application:							
The correct fee: The Correct fee: The Correct fee: N4	MNPA						
9. Declaration I/we hereby apply for planning permission/consent as described in th information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	is form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the						
Signed - Applicant:	Or signed - Agent:						
Date (DD/MM/YYYY): 9.1.2023 (date cannot be pre-application)	Profession Ballow (no.) in deglitery), passionne) Is all on an initiative Profession and reside						
10. Applicant Contact Details	11. Agent Contact Details						
Telephone numbers Country code: National number: Extension number:	Telephone numbers 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):						
12. 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:						

Email address:

Validation Checklist

Approval of Details Reserved by Condition



There are no national requirements for applications for the approval of details reserved by condition except that they should be made in writing and be accompanied by the appropriate fee. However, you may submit the following information:

Completed Application Form with Sign	ed and Dated Declaration	YES	NO
Other Drawings/Details Relevant to the include paper size, key dimensions and so		YES	NO
Application Fee Please see the Authority's Fee Sheet for f	urther information.	YES⊠	NO
Please do not hesitate to contact the Develor assistance.	opment Management Administrat	ONLINE NYN WEBSITE PAGN	INPA
		or to the	