

NYMNPA 30/01/2023 North York Moors National Park Authority The Old Vicarage **Bondgate** Helmsley York 7062 SBP

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

Application for removal or variation of a condition following grant of planning permission.

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. Applica	ant Name and Address	2. Agent Name and Address		
Title:	MR First name: J	Title:	MR First name	
Last name:	BARGH	Last name:	HENDERSON	
Company (optional):		Company (optional):		
Unit:	House number: 126 B House suffix:	Unit:	House number:	
House name:	THE OLD DAIRY	House name:		
Address 1:	HIGH STREET	Address 1:	MILLOW CCO	
Address 2:	HINDERWELL	Address 2:		
Address 3:		Address 3:		
Town:	SALTBURN	Town:	SALT BURN	
County:	N. YORKS	County:	CLEVELAND	
Country:		Country:		
Postcode:	T513 5ES	Postcode:	TSIZ IPB.	

Title:	MR First name: W		
Last name:	Henderson		
Company (optional):			
Unit:	House number: 12 House suffix:		
House name:			
Address 1:	WILLOW CLOSE		
Address 2:			
Address 3:			
Town:	SALTBURN		
County:	CLEVELAND		
Country:			
Postcode:	TSIZ IPB.		

3. Site Address Details Please provide the full postal address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local			
House 1268 House	authority about this application?			
House THE OLD DAIRY	If Yes, please complete the following information about the advice			
Italile:	you were given. (This will help the authority to deal with this application more efficiently).			
	Please tick if the full contact details are not			
Address 2: HINDERWELL	known, and then complete as much as possible:			
Address 3:	Officer name:			
Town: SALTBURN	Reference:			
County: N. YORKS	E-mail received 24/01/23.			
Postcode (optional): TS13 5ES	Date (DD/MM/YYYY):			
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?			
Easting: Northing:				
Description:	Advised to submit application from removal or variation of conditions application for the proposed changes to the approved plans			
	For the proposed changes to the approad plans			
	32,7,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,			
5. Description Of Your Proposal				
Please provide a description of the approved development as shown and date of decision in the sections below:	on the decision letter, including the application reference number			
	roof over existing workshop & alterations to			
store * void above garage to Facilitate use	as the lower assume the			
Spore & voice distribute of	adalpsinal with accommadaptors			
Reference number: Date of decision (DD/MM/YYYY): 16/11/2022 (date must be pre-application submission)				
Please state the condition number(s) to which this application relate	S:			
1.	6. condition 6 Timber Windows			
2. conictifion 2. approved plans	7.			
3.	8.			
4.	9.			
5. condition 5 windows in reveals	10.			
Has the development already started?	Yes No			
If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)				
Has the development been completed?				
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)				
6. Condition(s) - Removal				
o. containon(s, memoral				
Please state why you wish the condition(s) to be removed or change	d:			
Please state why you wish the condition(s) to be removed or change	intends to replace the existing cottage and wishes for the new windows to the converted altached photo.			
Please state why you wish the condition(s) to be removed or change conditions 5 \$ 6. windows. The applicant mixture of fumber/ vive windows with upve a store to make colour sage green seetypical	intends to replace the existing collage and wishes for the new windows to the converted affacted photo. Downish the condition to be varied:			

Town and Country Planning I certify/The applicant certifies that or	ertificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A (Development Management Procedure) (England) Order 2010 Certific in the day 21 days before the date of this application nobody except mysel ild interest or leasehold interest with at least 7 years left to run) of any part of	f/ the applicant was the
which the application relates.		_
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY:
I certify/ The applicant certifies that I 21 days before the date of this applic	CERTIFICATE OF OWNERSHIP - CERTIFICATE B Development Management Procedure) (England) Order 2010 Certific have/the applicant has given the requisite notice to everyone else (as listed in the second interest or leasehold wilding to which this application relates.	ted below) who, on the day
Name of Owner	Address	Date Notice Served
MR& MIS HUSBAND	124 HIGH STREET, HINDERWELL TS 13 SES	28/01/23
	(NOTICE SERVED BY APPLICANT)	
		,
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY:
*		30/01/2023.
 All reasonable steps have be 	be issued for this application en taken to find out the names and addresses of the other owners <i>(owner nith at least 7 years left to run)</i> of the land or building, or of a part of it, but I	is a person with a freehold have/ the applicant has
Name of Owner	Address	Date Notice Served
		:
	·	
Notice of the application has been pu (circulating in the area where the land	ublished in the following newspaper On the following date (what is situated): than 21 days before the control of the following date (what is situated):	hich must not be earlier
		late of the application):
· · · · · · · · · · · · · · · · · · ·		late of the application):
Signed - Applicant:	Or signed - Agent:	late of the application): Date DD/MM/YYYY:

7. Ownership Certificates (continu	CERTIFICATE OF	QWNERSHIP - 0	CERTIFICATE D	
date of this application, was the ow	opment Managen nis application en to find out the name of the part or former for the part or former is a pers	nent Procedure ames and addre	sses of everyone else who, on the da d interest or leasehold interest with at applicant has been unable to do so	ay 21 days before the least 7 years left to run)
Notice of the application has been publishe (circulating in the area where the land is situ	ed in the following i uated):	newspaper	On the following date (whice than 21 days before the date	h must not be earlier e of the application):
Signed - Applicant:	Ors	signed - Agent:		Date DD/MM/YYYY:
	ppment Managem ral Land Declaration	n - You Must Cor	(England) Order 2010 Certificate mplete Either A or B	under Article 12
(A) None of the land to which the application		art of, an agricult signed - Agent:	tural holding.	Date (DD/MM/YYYY):
Signed - Applicant:		signed - Agent.		
		-		30/01/2023
(B) I have/ The applicant has given the requ before the date of this application, was a te as listed below:	isite notice to ever nant of an agricult	y person other tl ural holding on a	han myself/ the applicant who, on that all or part of the land to which this ap	ne day 21 days oplication relates,
Name of Tenant		Address		Date Notice Served
				·

Signed - Applicant:	Or	signed - Agent:		Date (DD/MM/YYYY):
	anta Chaaldia	•		
9. Planning Application Requirem Please read the following checklist to make information required will result in your appl the Local Planning Authority has been subn	sure you have sent ication being deem	all the informati	ion in support of your proposal. Fail ill not be considered valid until all in	ure to submit all formation required by
The original and 3 copies of a completed and dated application form:		The o	original and 3 copies of the complete ership Certificate(A, B, C, or D - as ap	ed, dated oplicable):
The original and 3 copies of other plans and information necessary to describe the subje	I drawings or ect of the applicatio	n: The o	original and 3 copies of the complete e 12 Certificate (Agricultural Holding	
The correct fee: N/Ä				

Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY	<u>'):</u>
		** ** ** ** ** ** ** ** ** ** ** ** **	30/01/2023.	(date cannot be pre-application)
11. Applicant Contact Details		12. Agent Contact	Details	· · · · · · · · · · · · · · · · · · ·
Telephone numbers		Telephone numbers		
Country code: National number: Country code: Mobile number (optional Country code: Fax number (optional): Email address (optional):	Extension number:	Country code: Mobil	e number (optional): umber (optional): umber (optional):	Extension number:
13. Site Visit Can the site be seen from a public road, pu	blic footpath, bridleway o	r other public land?	Yes No	
If the planning authority needs to make an out a site visit, whom should they contact?	appointment to carry (Please select only one)	Agent		f different from the pplicant's details)
If Other has been selected, please provide:		Talanhana numban		
Contact name:		Telephone number:		·