

NYMNPA 27/02/2024 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

ELLE

First name:

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## Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning 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

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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

MARSDEN

Title:

Last name:

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

Title:

Last name:

2. Agent Name and Address

(optional):		(optional): STONE AND ASSOCIATES ARCHITECTS LI
Unit:	House House suffix:	Unit: House number: 78 House suffix:
House name:	E GATEHOUSE	House THE STUPIO
Address 1: Ho	OD LV	Address 1: 7B
Address 2: CL	DUGHTON NEWLANDS	Address 2: SAVILLE ST
Address 3:		Address 3:
Town: SC	ARBOROUGH	Town: MALTON
County:		County:
Country:		Country:
Postcode:	1013 OAT	Postcode: Yo 17 7LL
3. Description	n of Proposed Works	
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3. Description of Proposed Works (continued)	
Has the work already started?	
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed?	
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.  House House	Is a new or altered vehicle access proposed to or from the public highway? Yes No
Unit: House House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name: THE GATE HOUSE	proposed to or from the public highway? Yes Vo
Address 1: HOOD W	Do the proposals require any diversions, extinguishments and/or creation of public
Address 2: CLOUGHTON NEWLANDS	rights of way?  If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
Town: SCARBOROUGY	
County:	
Postcode V. 12 D AT	
(optional): 7015 UAT	
6. Pre-application Advice	7. Trees and Hedges
Has assistance or prior advice been sought from the local authority about this application?	Are there any trees or hedges on your own property or on adjoining properties which
	are within falling distance of your proposed
If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this	development? Yes 4No
application more efficiently).	If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:
Please tick if the full contact details are not known, and then complete as much possible:	
Officer name:	
Reference:	
	Will any trees or hedges need to be removed or pruned in
Date (DD MM YYYY):	order to carry out your proposal?
(must be pre-application submission)	If Yes, please show on your plans which trees by giving them
Details of the pre-application advice received:	numbers e.g. T1, T2 etc, state the reference number of the plan(s)/ drawing(s) and indicate the scale.
·	
8. Parking	Q. Authority Employee / Mambay
Will the proposed works affect	9. Authority Employee / Member With respect to the Authority, I am:
existing car parking arrangements?	(a) a member of staff  (b) an elected member  Do any of these statements apply to you?
If Yes, please describe:	(b) an elected member statements apply to you? (c) related to a member of staff
	(d) related to an elected member
	If Yes, please provide details of the name, relationship and role

applicable, please stat	e what materials are to be used externally. Inclu	The type, colour and name to the terms of th	ple	Dani
	Existing (where applicable)	Proposed		Don' Knov
Walls	STONE (COURSED)	STONE TO MATCH EXISTING		
Roof	SLATE	SLATE TO MATCH EXISTING		
Windows	PAINTETIMBER	ALUMINIUM (GREY)		- try y right
Doors	COMOPOSITE DOOR	ALUMINIUM BI-FOLD (GREY)		
Boundary treatments (e.g. fences, walls)	FENCING/ HEDGING	AS EXISTING		
Vehicle access and hard-standing	GRAVELLED PRIVE	AS EXISTING		
Lighting	N/A	N/A		
Others	N/A	CAK TIMBER FRAME		
(please specify)	N/A	CONSERVATION ROOF LIGHT		
•	ditional information on submitted plan(s)/drawi		\$	□ N
	Gerences for the plan(s)/drawing(s)/design and action of the plan(s)/drawing(s)/design and action of the plan of t			

11. Ownership Certificate		
Town and Country Plann I certify/The applicant certifies th	nust be completed, together with the Agricultural Holdings CERTIFICATE OF OWNERSHIP - CERTIFICATE A ing (Development Management Procedure) (England) Order at on the day 21 days before the date of this application nobody	2010 Certificate under Article 12
owner (owner is a person with a fre which the application relates. Signed - Applicant:	enote interest of leasenoid interest with at least 7 years left to run)	of any part of the land or building to
- Approximation	Or signed - Agent:	Date (DD/MM/YYYY):
		26.02.24
21 days before the date of this ap	CERTIFICATE OF OWNERSHIP - CERTIFICATE B ng (Development Management Procedure) (England) Order hat I have/the applicant has given the requisite notice to every polication, was the owner (owner is a person with a freehold interest or building to which this application relates.	
Name of Owner	Address	Date Notice Served
1		
Signed - Applicant:	Or signed - Agent:	Dot- (DD (AAM 00000)
	Or signed - Agent.	Date (DD/MM/YYYY):
Ali reasonable steps have l	 an be issued for this application been taken to find out the names and addresses of the other ow twith at least 7 years left to run) of the land or building, or of a pa	ners (owner is a person with a freehold rt of it , but I have/ the applicant has
Name of Owner	Address	Date Notice Served
. :		
otice of the application has been princulating in the area where the la	oublished in the following newspaper On the following is situated): than 21 days be	ing date (which must not be earlier before the date of the application):
gned - Applicant:	Or signed - Agent:	D-1- (DD 44140000
	or signed Agents	Date (DD/MM/YYYY):

11. Ownership Certificates (cont		E OF OWNERSHIP - CERTI	FICATE D	
Town and Country Planning (Dev	CERTIFICATI velopment Man	agement Procedure) (Eng	land) Order 2010 Certific	ate under Article 12
I certify/ The applicant certifies that:				
<ul> <li>Certificate A cannot be issued for</li> <li>All reasonable steps have been to</li> </ul>	aken to find out t	the names and addresses o	f everyone else who, on the	day 21 days before the
date of this application, was the of any part of the land to which t	owner lowner is a	a nerson with a freehold inter	rest or leasehold interest Witi	n at least / years left to run)
The steps taken were:				
Notice of the application has been publis	thed in the follow	ving newspaper	On the following date (w	hich must not be earlier
(circulating in the area where the land is	situated):		than 21 days before the c	late of the application):
Signed Applicants		Or signed - Agent:		Date (DD/MM/YYYY):
Signed - Applicant:	tot.	Or signed Agent		
12. Agricultural Land Declaration	n			
	AGRICIII	LTURAL LAND DECLARAT	ION	
Town and Country Planning (Dev	elopment Mana	aement Procedure) (Engl	land) Order 2010 Certifica	te under Article 12
_		ration - You Must Complete		
(A) None of the land to which the applica	ation relates is, o		olding.	
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
				26.02.24
(B) I have/ The applicant has given the re	quisite notice to	every person other than m	yself/ the applicant who, o	n the day 21 days
before the date of this application, was a	tenant of an agr	icultúral holding on all or p	part of the land to which thi	s application relates,
as listed below:  Name of Tenant	I	Address		Date Notice Served
Name or Tenant		Address		- Date (todae out to
			•	
	·			<u> </u>
			w	
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
Jigited Applicants				
13. Planning Application Requi	rements - Che	ecklist		- 4
Please read the following checklist to ma information required will result in your a	ke sure you have	e sent all the information in	support of your proposal.	Failure to submit all Il information required by
the Local Planning Authority has been su	ıbmitted.			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The original and 3 copies of a	The orio	ginal and 3 copies of a	The correct fee:	
completed and dated application form:	□ nronos	and access statement if ed works fall within a	_,	S
The original and 3 copies of a plan which identifies the land to which the application	conserv	vation area or	The original and 3 completed, dated	d Ownership 🖂
relates drawn to an identified scale	WONG	Heritage Site, or relate to a Building:	Certificate (A, B, C	or D - as applicable):
and showing the direction of North:		<b>J</b>	<b>.</b>	
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	° _		The original and incompleted, dated	Article 12 Certificate

14. Declaration			
I/we hereby apply for planning permission/consent as described in tinformation. I/we confirm that, to the best of my/our knowledge, angenuine opinions of the person(s) giving them.	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the		
Signed - Applicant: Or signed - Agent	: Date (DD/MM/YYYY):		
	26.02.24 (date cannot be pre-application)		
15. Applicant Contact Details	16. Agent Contact Details		
Telephone numbers	Telephone numbers		
Country code: National number: Extension number:	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):		
17. 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:			
ELIE DOUMMAN			
Email address:			