

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

## Application for approval of details reserved by condition.

NYMNPA

09/07/2018

## 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. Applicant Name and Address					2. Agent Name and Address					
Title:	Mrs	First name:	Terry An	n	Title:	Mr	First name:	Michael	l	
Last name:	Whiteley				Last name:	Miller				
Company (optional):					Company (optional):	Michael Miller BA (Hons) ARCH. MCIAT Architectural Consultant				
Unit:		House 68 number: 68	3	House suffix:	Unit:		House number: 10	6	House suffix:	
House name:					House name:					
Address 1:	68, Bawtry Road,			Address 1:	Park view					
Address 2:	Bessacar,			Address 2:	Glaisdale					
Address 3:					Address 3:					
Town:	Doncaster			Town:	Whitby					
County:	South Yorkshire			County:	North Yorkshire					
Country:					Country:					
Postcode:	DN4 7B	Q			Postcode:	YO21 2P	Р			

3. Site Ac	ldress Details		4. Pre-application Advice				
Please provi	ide the full postal address of the appli		Has assistance or prior advice been sought from the local authority about this application?				
Unit:	House number:	House suffix:	authority about this application? X Yes No				
House name:	York House		If Yes, please complete the following information about the advice 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 1:	King Street						
Address 2:	Robin Hoods Bay		known, and then complete as much as possible:				
Address 3:			Officer name: Edward Freedman				
Town:	Whitby		Reference:				
County:	North Yorkshire		Email				
	of location or a grid reference.		Date (DD/MM/YYY): 04/07/2018 (must be pre-application submission) Details of pre-application advice received?				
Easting:	Northing:		Notation on amended elevation pertaining to Structural				
Description			Engineers details; specification required.				
		J					
5. Descri	ption Of Your Proposal						
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: Internal alterations and refurbishment works including installation of replacement timber windows and doors and rebuilding of boundary wall at York House, King Street, Robin Hoods Bay							
MYM/2018/0232/FL + Data of desision 20th Lupp 2018 (Date must be pre-application							
	number: NYM/2018/0233/LB	Date of decision:	5	une 2018 (Date must be pre-application submission) (DD/MM/YYYY)			
	e the condition number(s) to which th	his application relates					
	3		6.				
2.			7.				
3.			8.				
4.			9.				
5.			10.				
Has the dev	velopment already started?						
lf Yes, pleas	se state when the development starte	ed (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. Discharge Of Condition							
Please provide a full description and/or list of the materials/details that are being submitted for approval:							
Drawing: 193.12a Elevations I 193.20 Construction Notes I 193.21 Construction Notes II 193.21 Construction Notes II							
7. Part Discharge Of Condition(s)							
Are you seeking to discharge only part of a condition?							
If Yes, please indicate which part of the condition your application relates to:							

\$Date:: 2012-07-17 #\$ \$Revision: 4636 \$

<b>8. Planning Application Requirements - Checklist</b> Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.							
The original and 3 copies of a The completed and dated application form:	priginal and 3 copies of other plans and drawings formation necessary to describe the subject of the application: $[X]$						
The correct fee:							
<b>9. Declaration</b> I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Signed - Applicant:							
Date (DD/MM/YYYY):       9th July 2018       (date cannot be pre-application)							
10. Applicant Contact Details							
Telephone numbers       Extension number:         Country code:       National number:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Country code:       Fax number (optional):         Email address (optional):       Image: Country code image: Country country code image: Country country country code image: Country count	Telephone numbers       Extension number:         Country code:       National number:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Country code:       Fax number (optional):         Email address (optional):       Email address (optional):						
<b>12. Site Visit</b> Can the site be seen from a public road, public footpath, bridleway or If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? ( <i>Please select only one</i> ) If Other has been selected, please provide: Contact name:	r other public land?       X       Yes       No         X       Agent       X       Applicant       Other (if different from the agent/applicant's details)         Telephone number:						
Email address:							