

North York Moors National Park Authority
The Old Vicarage
Bondgate
Helmsley
York
Y062 5BP

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

> 697 # 14150 25/4/16

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

2 2 APR 2016

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: | First name: | Title: | First name: | | |
| Last name: | | Last name: | | | |
| Company (optional): | DJ& FK COCKERILL \$ SON | Company (optional): | PETER RAYMENT DESIGN LTD | | |
| Unit: | House number: House suffix: | Unit: | House House suffix: | | |
| House name: | FOX & BABBIT FARM | House name: | UPGANG | | |
| Address 1: | lockton | Address 1: | WESTGATE | | |
| Address 2: | | Address 2: | THORNTON IS DALE | | |
| Address 3: | | Address 3: | | | |
| Town: | PICKERING | Town: | PICKERING | | |
| County: | | County: | | | |
| Country: | | Country: | | | |
| Postcode: | Y018 7NQ | Postcode: | Y018 75G | | |

| 3. Site Address Details | | | application | n Advice | om the local | | | |
|--|---|--|---------------|--|-----------------|--|--|--|
| Please provide the full postal address of the application site. | | | ance or prior | advice been sought fro | Yes No | | | |
| Unit: | House number: House suffix: | | | | | | | |
| House name: | FOX & BOBBIT FARM | If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this | | | | | | |
| Address 1: | LOCKTON | application more efficiently). Please tick if the full contact details are not | | | | | | |
| Address 2: | Tee Tee | known, and then complete as much as possible: | | | | | | |
| Address 3: | | Officer name: | | | | | | |
| Town: | PICKERING | Reference: | | | | | | |
| County: | | | | | | | | |
| Postcode | Y018 7NQ | Date (DD/MM/YYYY): (must be pre-application submission) | | | | | | |
| (optional): Description | n of location or a grid reference. ompleted if postcode is not known): | Details of pre-application advice received? | | | | | | |
| Easting: | Northing: | | | | | | | |
| Description | n: | | | 0.045 | | | | |
| | | | 2 2 APR - | | | | | |
| <u> </u> | | | | | | | | |
| 5. Description 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: reserved matters to NYM/2014/0276/OU for construction of 1 no. agricultural workers | | | | | | | | |
| dwelling together with associated garage, access and garden at Fox and Rabbit Farm, | | | | | | | | |
| Reference | | - | 2 15 | (Date must be pre-appl submission) (DD/MM/Y | YYY) | | | |
| Please sta | ate the condition number(s) to which this application rela | | | | | | | |
| 1. | 6,7,8,13,14,15 \$ 16 | 6. | | | | | | |
| 2. | | 7. | | | | | | |
| 3. | | 8. | | | | | | |
| 4. | | 9. | | | | | | |
| 5. | | 10. | | | | | | |
| Has the o | development already started? | | Yes | No (date must be p | re-application | | | |
| If Yes, pl | ease state when the development started (DD/MM/YYYY | '): | | submission) | не аррисаны. | | | |
| Has the | development been completed? | Ŷ | Yes | No (data must be r | ore-application | | | |
| If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission) | | | | | | | | |
| 6. Disc | harge Of Condition | | | ad for camerial. | | | | |
| Please p | provide a full description and/or list of the materials/detai | Is that are b | eing submitte | eu ioi appiovai: | | | | |
| MATERIAL SAUPLES ON SITE. DETAILS IN ATTACHETY DOCUMENTS | | | | | | | | |
| oches to the state | | | | | | | | |
| 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: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |