

2016 10350 North York Moors National Park Authority
The Old Vicarage

NYA 12 MAY 2018

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

Application for listed building consent for alterations, extension or demolition of a listed building. 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.

(a n						
1. Applicant Name and Address		2. Agent Name and Address				
Title:	First name:	Title:	MR First name: JOHN			
Last name:		Last name:	BLAMMIRES			
Company (optional):	LIFESTALE HOTELS LTD	Company (optional):				
Unit:	House number: House suffix:	Unit:	House number: 56 House suffix:			
House name:		House name:				
Address 1:	SCAWBY HOUSE	Address 1:	PASTURE LANE			
Address 2:	31 HIGH STREET	Address 2:	SEAMER			
Address 3:		Address 3:				
Town:	KIRTON LINDSBY	Town:	SCARBOROTCH			
County:	NORTH LINCOLN SHIRE	County:	NORTH YORK SHIRE			
Country:	ENGLAND	Country:	ENCLAND			
Postcode:	6N 21 4LX.	Postcode:	9012 4QR			
3. Description of Proposed Work						
Please describe the proposals to alter, extend or demolish the listed building(s):						
NP MOSC DA CATTONIA TO MAIN DAGGERA						

PROPOSED EXTENSION TO HOTEL RESTAURANT AREA FORMED BY CHAZED WALL AND ROOF TO PARTIALLY CLOSEIN WALKWAY AREA.

2 Description of Droposed Work (continued)	4. Site Address Details		
3. Description of Proposed Work (continued)	Please provide the full postal address of the application site.		
Has the work already	House House		
started without consent? Yes No	House suffix: suffix:		
If Yes, please state when the	name:		
work was started (DD/MM/YYYY):	Address 1: DX PASTURE HALL HOTEL		
	Address 2: LOW ROMI/LANG EDITHS DRIVE		
	Address 3:		
(date must be pre-application submission)	Town: SCARBOROICH		
Has the work been	County: NORTH GARKSHIRE		
completed without consent? Yes V No	Postcode (optional): Yell STV.		
	Description of location or a grid reference.		
If Yes, please state the date when the work was completed (DD/MM/YYYY):	(must be completed if postcode is not known):		
work was completed (DD/ININI/TTTT):	Easting: Northing:		
	Description:		
(date must be pre-application submission)			
(auto mass se pre appreadon casmission)			
5. Related Proposals Are there any current applications, previous	6. Pre-application Advice Has assistance or prior advice been sought from the local		
proposals or demolitions for the site? Yes V No	authority about this application?		
ਤਿੰਦ ਮੁਤਰਿਸ਼ If Yes please describe and include the planning application			
reference number(s), if known:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this		
Description Reference number	application more efficiently).		
* NOT FOR PARTICULAR AREA OF	Please tick if the full contact details are not known, and then complete as much as possible:		
	Officer name:		
THE SITE.			
BUT RECENT APPLICATION FOR	Reference:		
LEISURE CENTRE/COMPLEX			
(REVUED SLITEME NYM/2014/0306/FL	Date (DD/MM/YYYY):		
IN 67HER PART OF LAND WITH SAME OWNER	(must be pre-application submission)		
AND SHER PREVIEWS APPLICATIONS	Details of pre-application advice received?		
FOR OTHER PARTS OF SITE LUNGO			
By SAMEOWNER.			
7. Neighbour and Community Consultation	8. Authority Employee / Member		
Have you consulted your neighbours or	With respect to the Authority, I am: Do any of these		
the local community about the proposal? Yes No	(a) a member of staff statements apply to you?		
WW	(c) related to a member of staff		
If Yes, please provide details:	(d) related to an elected member		
	If Yes, please provide details of the name, relationship and role		
. 11	11		

	Existing (where applicable)	Proposed	Not applicable	Don Know
External walls	NATURAL STONE	NATURAL STANE		
Roof covering	N-ATURAL CLAU PANTILLE	TIMBER FRAMED CLUZING		
Chimney	THO CHANGES -			
Windows	TYMBER PAINTEN	TIMBER PAINTED		
External doors	TIMBER PAINTED	TIMBER PAINTED		
Ceilings	EXPOSED STRUCTURE	exposed structure		
Internal walls	NO CHANGES			
Floors	FIAL PAVED	LINCRETE		
Internal doors	TIMBER PAINTED	TIMBER PAINTED		
Rainwater goods	ainwater goods No CAMZES			
Boundary treatments (e.g. fences, walls)	r(
/ehicle access and nard standing	И			
ighting	· · · · · · · · · · · · · · · · · · ·			
Others add description)	N			
	tional information on submitted drawings or plans s)/drawing(s) references:	s? : Yes No		-

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building? Yes You	Do the proposed works include alterations to a listed building? Yes No
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building: Yes	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building:	
c) Demolition of a part of the listed building: Yes	
If the answer to c) is Yes:	c) Works to any structure or object fixed to the property (or buildings within
i) What is the total volume of the listed building?(cubic metres)	its curtilage) internally or externally?
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission) Please provide a brief description of the building or part of the building representation.	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):
building you are proposing to demolish:	on actual support and state references for the plants//citawingts/.
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	SEE ATTACHED PLANS.
	PLANS.
]
Why is it necessary to demolish or extend (as applicable) all or par of the building(s) and or structure(s)?	t
	7[[]
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building?
	Yes No Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II 🗸 Ecclesiastical Grade II 🗌	
Don't know	

;:

16. Declaration	
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.	facts stated are true and accurate and any opinions given are the
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY): (date cannot be pre-application)
17. Applicant Contact Details	18. Agent Contact Details
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
19. Site Visit 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? (Please select only one) If Other has been selected, please provide: Contact name: Email address:	other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
	\$Date:: 2012-07-17 #\$ \$Revision: 4636 \$