



NYMNP
30 AUG 2016

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

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

Town and Country Planning Act 1990.

L195 # 16333

Planning (Listed Buildings and Conservation Areas) Act 1990

19/7/16

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

Title: First name:

Last name:

Company (optional):

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

2. Agent Name and Address

Title: First name:

Last name:

Company (optional):

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name: **LAUD AT**

Address 1: **ESKDALESIDE**

Address 2: **SLEIGHTS**

Address 3:

Town: **WHITBY**

County:

Postcode (optional): **YO22 5EP**

Description of location or a grid reference. (must be completed if postcode is not known):

Easting: **486144** Northing: **506623**

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

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 known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY): (must be pre-application submission)

Details of pre-application advice received?

5. Description Of Your Proposal

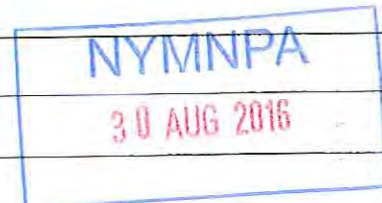
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

CONSTRUCTION OF 10 NO. AFFORDABLE DWELLINGS WITH ASSOCIATED ACCESS AND LANDSCAPING WORKS AT LAUD OFF ESKDALESIDE, SLEIGHTS

Reference number: **NYM/2013/0149/FL** Date of decision (DD/MM/YYYY): **22/01/2015** (date must be pre-application submission)

Please state the condition number(s) to which this application relates:

1.	CONDITION 2	6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	



Has the development already started? Yes No

If Yes, please state when the development started (DD/MM/YYYY): **01/04/2016** (date must be pre-application submission)

Has the development been completed? Yes No

If Yes, please state when the development was completed (DD/MM/YYYY): **31/03/2016** (date must be pre-application submission)

6. Condition(s) - Removal

Please state why you wish the condition(s) to be removed or changed:

TO REGULARISE LAYOUT, LANDSCAPING AND HARDSURFACING WORKS, WALLS AND FENCES, ALTERATIONS TO CAR PORTS AND INSTALLATION OF STREET LIGHT COLUMNS TOGETHER WITH ERECTION OF CANOPIES, OMISSION OF ROADLIGHTS, ALTERATIONS TO GUTTERING AND INSTALLATION OF GAS BOXES.

If you wish the existing condition to be changed, please state how you wish the condition to be varied:

SUBSTITUTION OF APPROVED DRAWINGS

10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

30/08/2016

(date cannot be pre-application)

11. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

12. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

13. 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:

Email address:

