



North York Moors National Park Authority
The Old Vicarage
Bondgate
Helmsley
York

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

Voicho of cond with 12

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

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

'ublication of applications on planning authority websites

lease 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.

lease complete using block capitals and black ink.

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

1. Applicant Name and Address					
MR First name: IAN					
PMAN					
House number: 2 House suffix:					
BEACON WAY					
SNEATON					
UKITOT					
NORTH YORKS					
40225UR					

2. Agent Name and Address						
Title:	First name:					
Last name:	NYMNPA					
Company (optional):	7 FEB 2017					
Unit:	House House number: suffix:					
House name:						
Address 1:	· 61, ·					
Address 2:						
Address 3:						
Town:						
County:						
Country:						
Postcode:						

3. Site Address Details	Has assistance or prior advice been sought from the local
Please provide the full postal address of the application site. House House	authority about this application?
onit: suffix: suffix:	
House AS IST PAGE	If Yes, please complete the following information abo he advice you were given. (This will help the authority to deal with this
Address 1:	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town:	Reference:
County:	
Postcode (optional):	Date (DD/MM/YYYY):
Description of location or a grid reference.	(must be pre-application submission)
(must be completed if postcode is not known):	Details of pre-application advice received?
Easting: Northing:	
Description:	¬III
5. Description Of Your Proposal	
Please provide a description of the approved development as sho and date of decision in the sections below:	own on the decision letter, including the application reference number
Reference number: Nイベノンは60つの1/1FL Date of decision	n (DD/MM/YYYY): 46-2017 (date must be pre-application submission)
Please state the condition number(s) to which this application rela	7 1 2015
1. CONDITION 3	6.
2. CONDITION 5	7.
3.	8.
4.	9.
5.	10.
Has the development already started?	Yes No
	/ data must be are application
If Yes, please state when the development started (DD/MM/YYYY	submission)
Has the development been completed?	Yes No
If Yes, please state when the development was completed (DD/M	MM/YYYY): (date must be pre-application submission)
5. Condition(s) - Removal	
Please state why you wish the condition(s) to be removed or chan	nged:
3) IAM RENDERING THE OUTSIN	ROOF TILE ON THE RE-ROOF
S) IAM USING A GREY	ROOF TILE ON THE RE-ROOF
If you wish the existing condition to be changed, please state how	
3) 1 Am USING A BLACK	FACE BRICK UP TO PPC

/we hereby apply for planning permission nformation. I/we confirm that, to the begenuine opinions of the person(s) giving	st of my/our knowledge, any	his form and the accompanying plan r facts stated are true and accurate a	s/drawings and additional nd any opinions given are the	
Signed - A cant:	Or signed - Agent:	Date	Date (DD/MM/YYYY):	
		05	-02-2-17 (date cannot be pre-application	
11. Applicant Contact Details		12. Agent Contact Details		
Telephone numbers		Telephone numbers		
Country code: National number:	Extension number:	Country code: National numbe	r: Extension number:	
Country code: Mobile number (option	al):	Country code: Mobile number	optional):	
Country code: Fax number (optional):		Country code: Fax number (opt	ional):	
Email address (optional):		Email address (optional):		
13. Site Visit				
Can the site be seen from a public road, p	ublic footpath, bridleway or	other public land? Yes	□No	
f the planning authority needs to make a out a site visit, whom should they contact	n appointment to carry (Please select only one)	Agent Applicant	Other (if different from the agent/applicant's details)	
f Other has been selected, please provide	: :			
Contact name:		Telephone number:		
IAN MAN				
Email address:				
1_/				

10. Declaration

0.7 FEB 2017