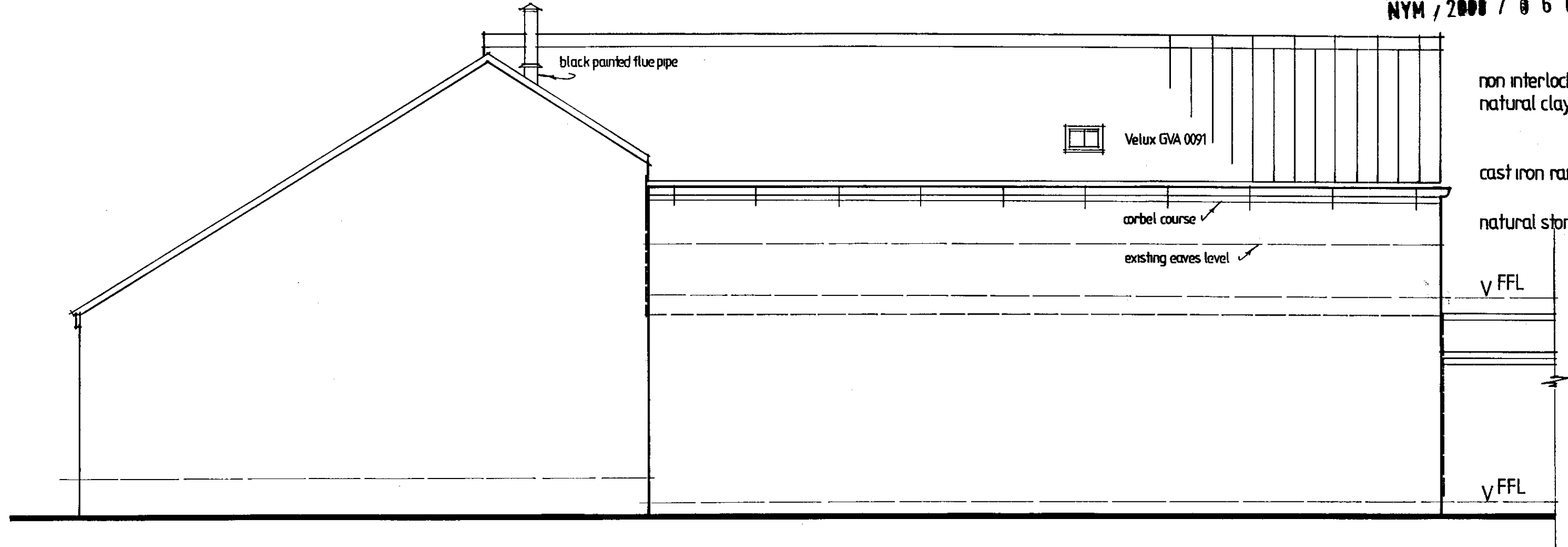
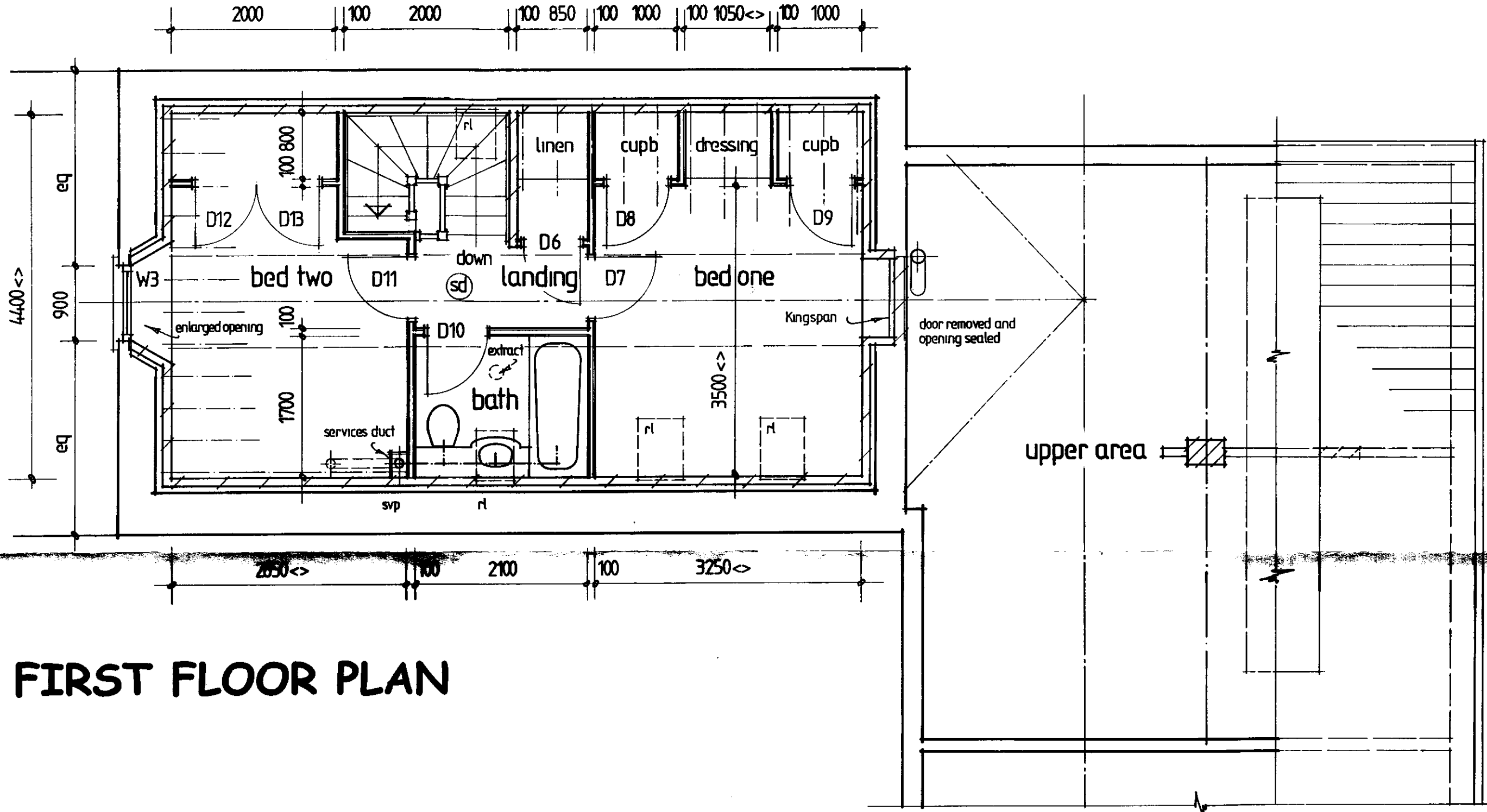


SOUTH ELEVATION

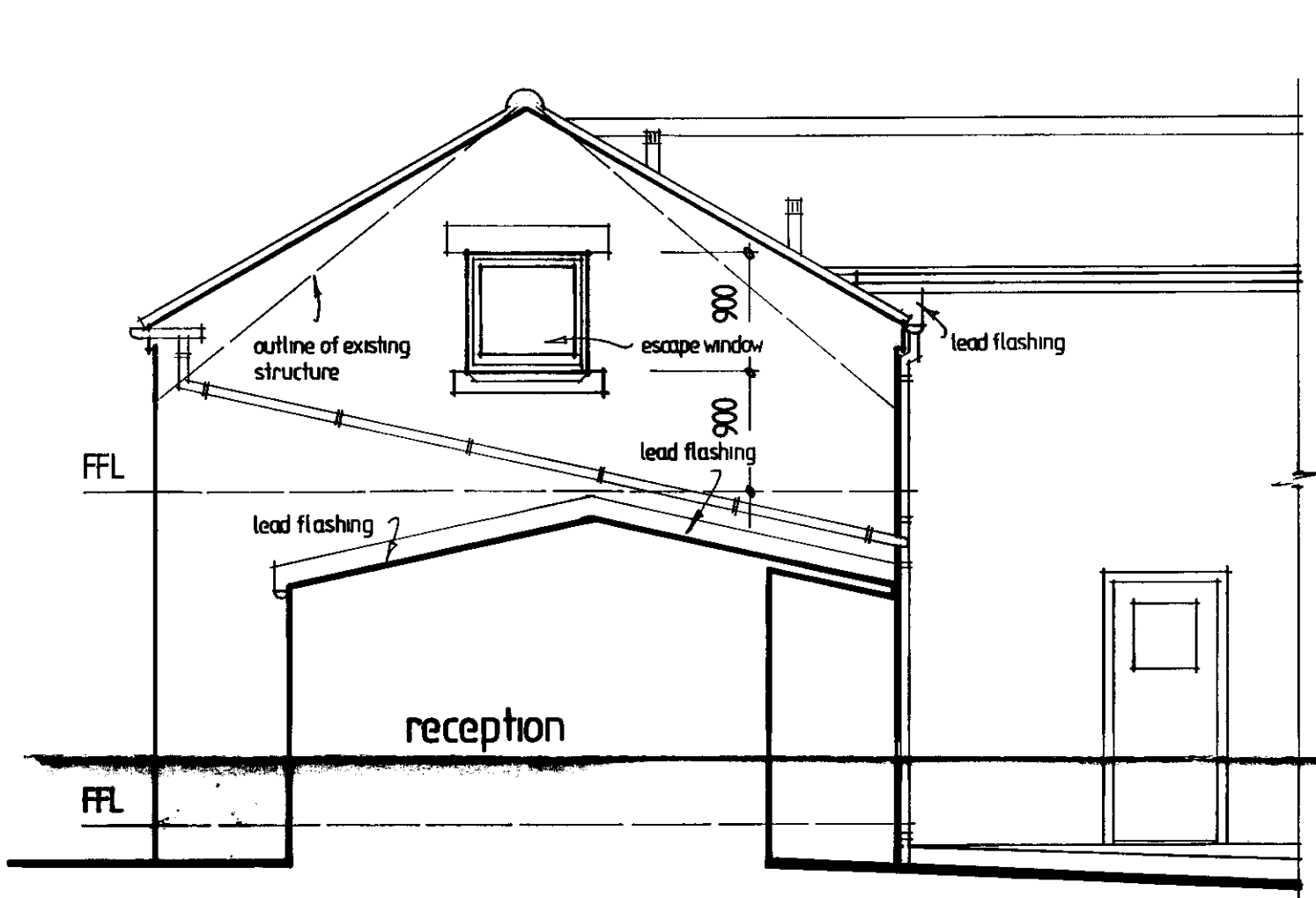
SECTION B



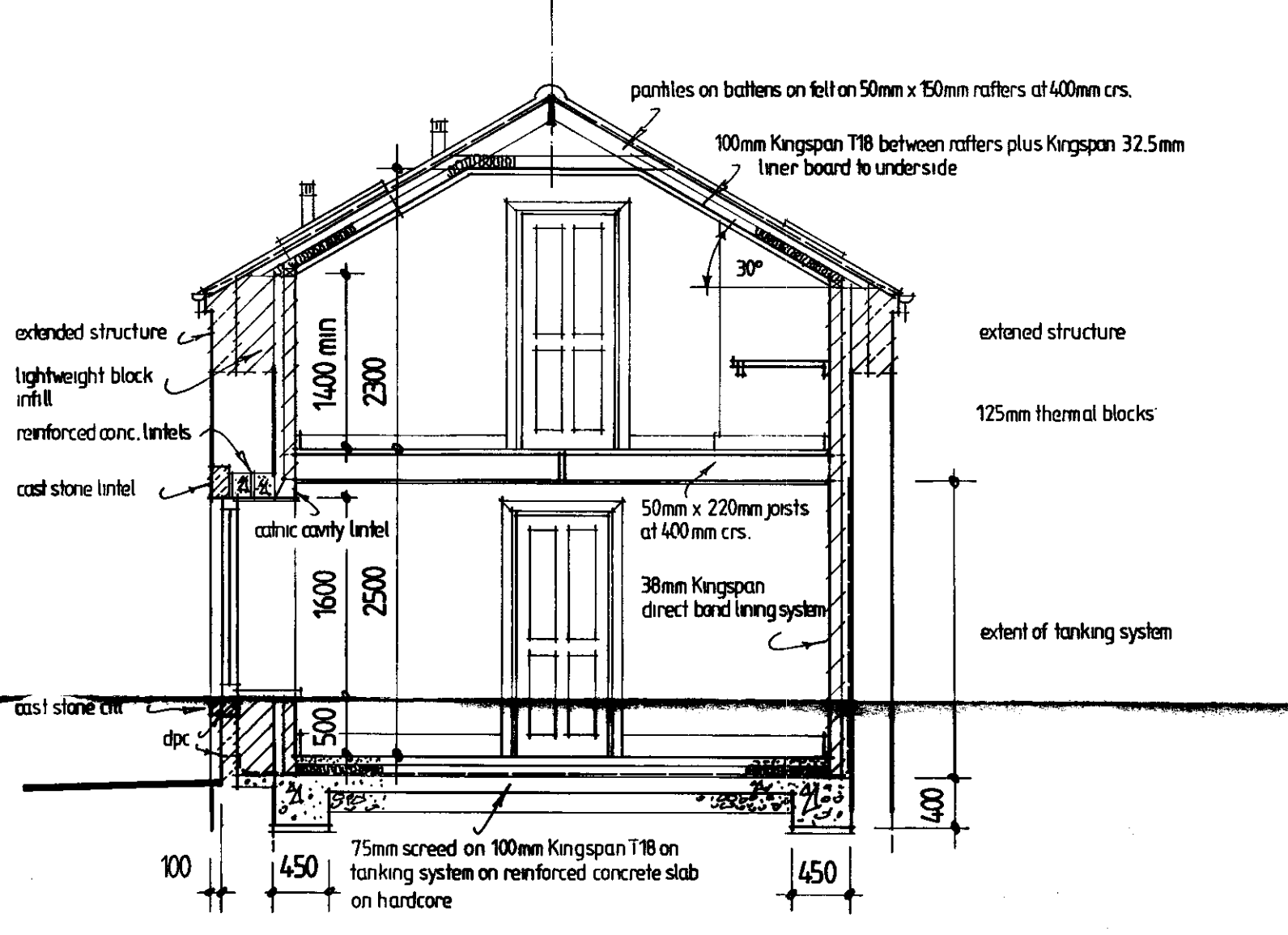
NORTH ELEVATION



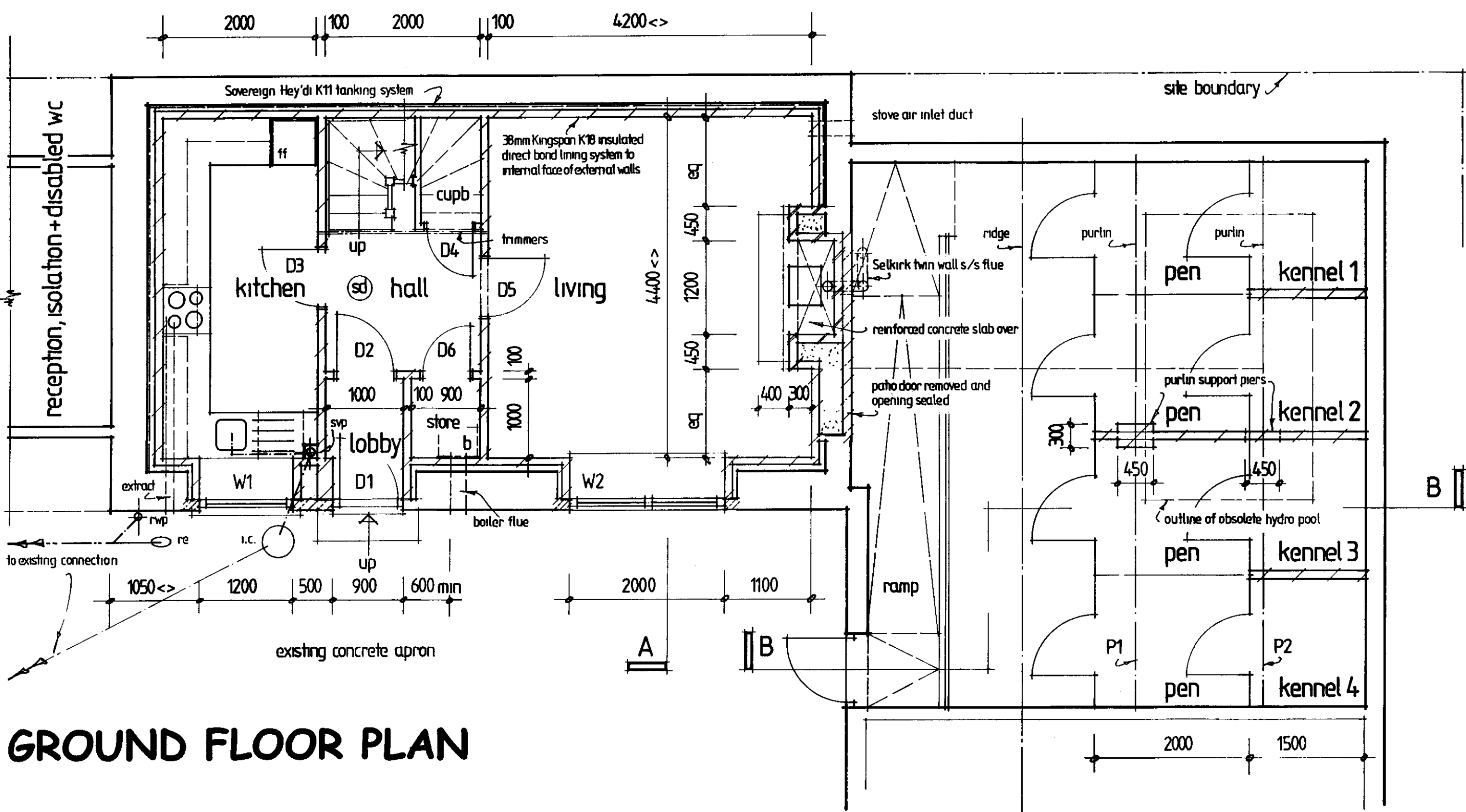
FIRST FLOOR PLAN



WEST ELEVATION



SECTION A

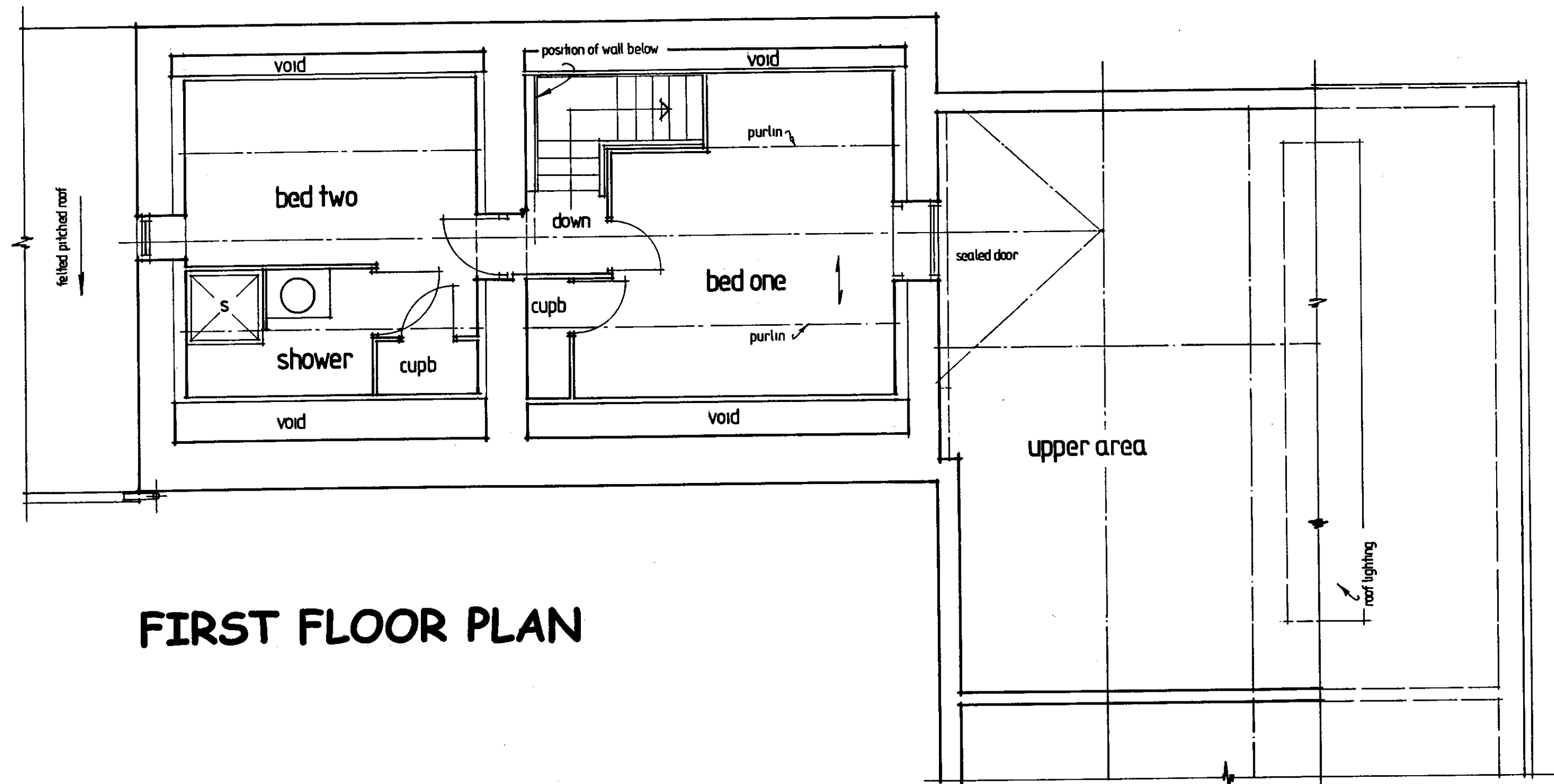


GROUND FLOOR PLAN

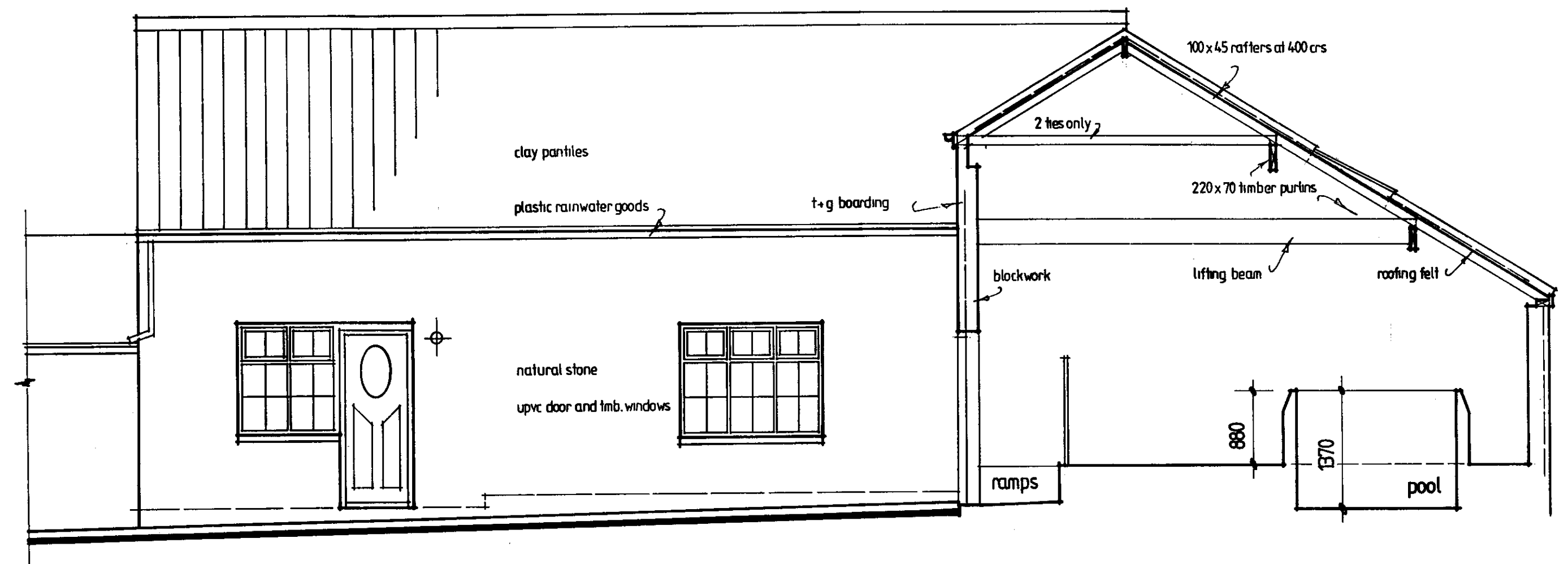
NYMNP
31 JUL 2008

ARCHITECTURAL DESIGN
richard wynn

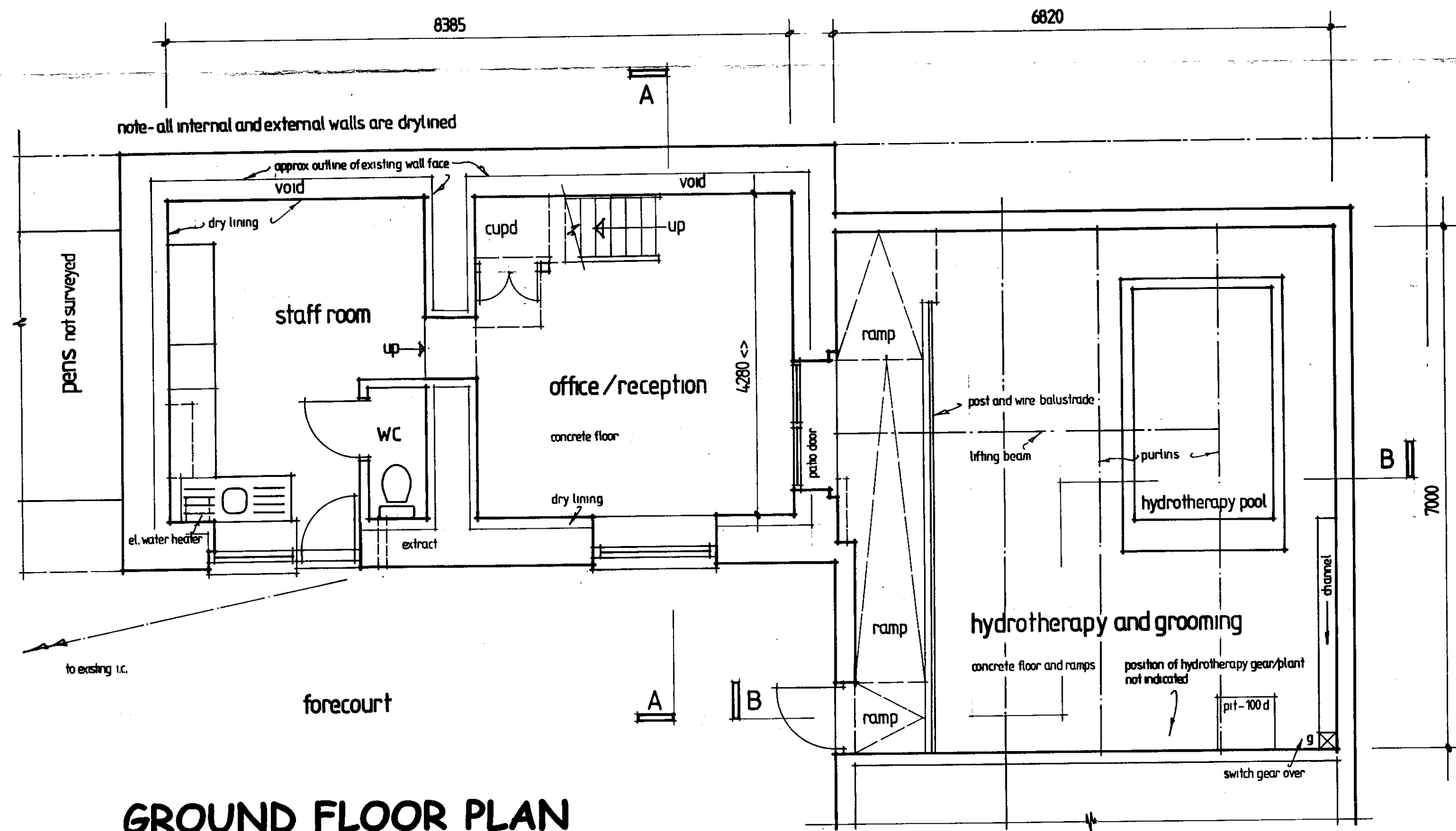
CHANGE OF USE OF THE OLD COTTAGE TO DWELLING PLUS CONVERSION OF THE HYDRO AREA TO KENNELS AT COPPERGATE KENNELS, CLOUGHTON, SCARBOROUGH
Scale : 1:50
Date : July 2008
Drawn : R.G.W
Project : 1236-3A



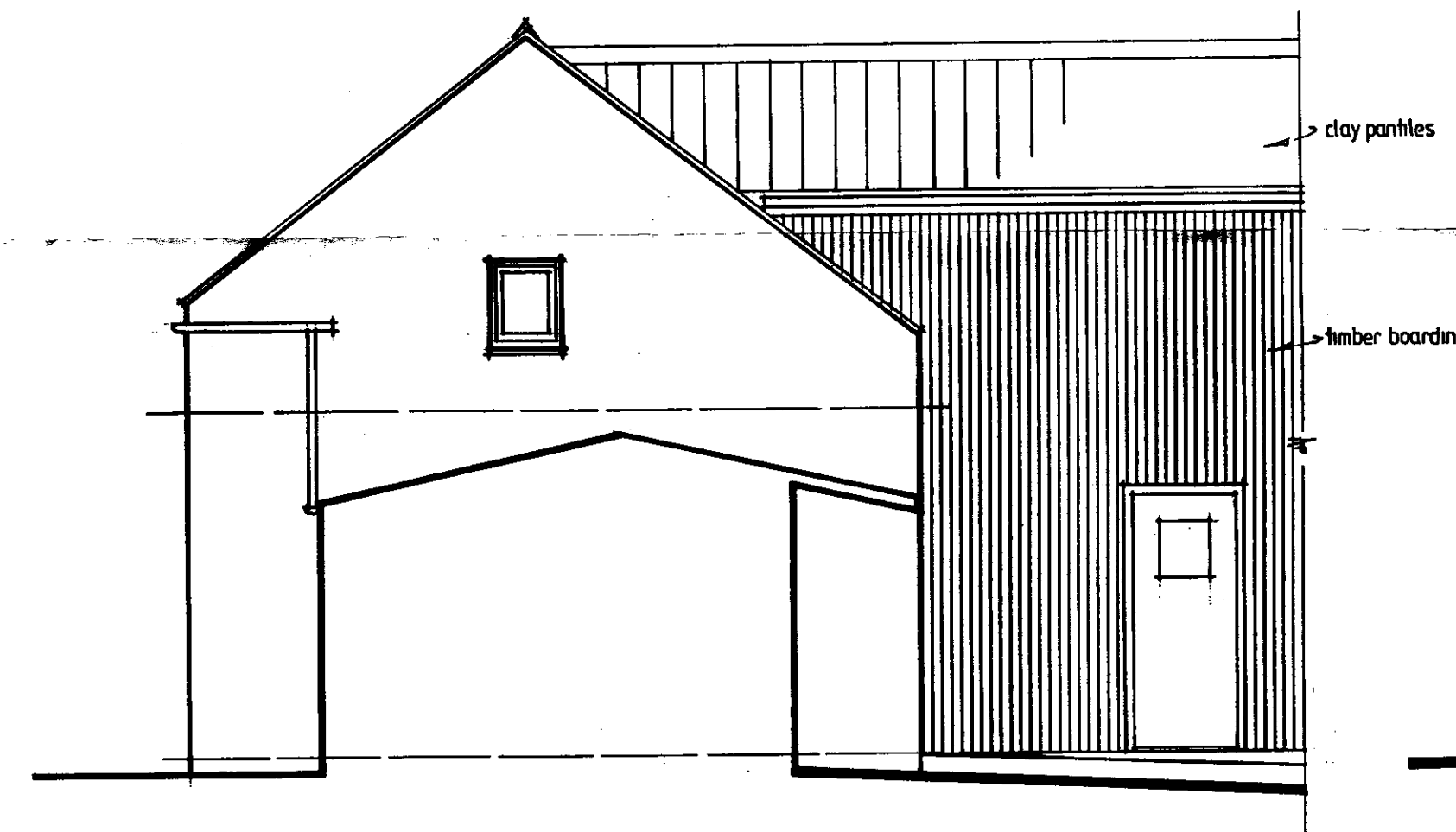
FIRST FLOOR PLAN



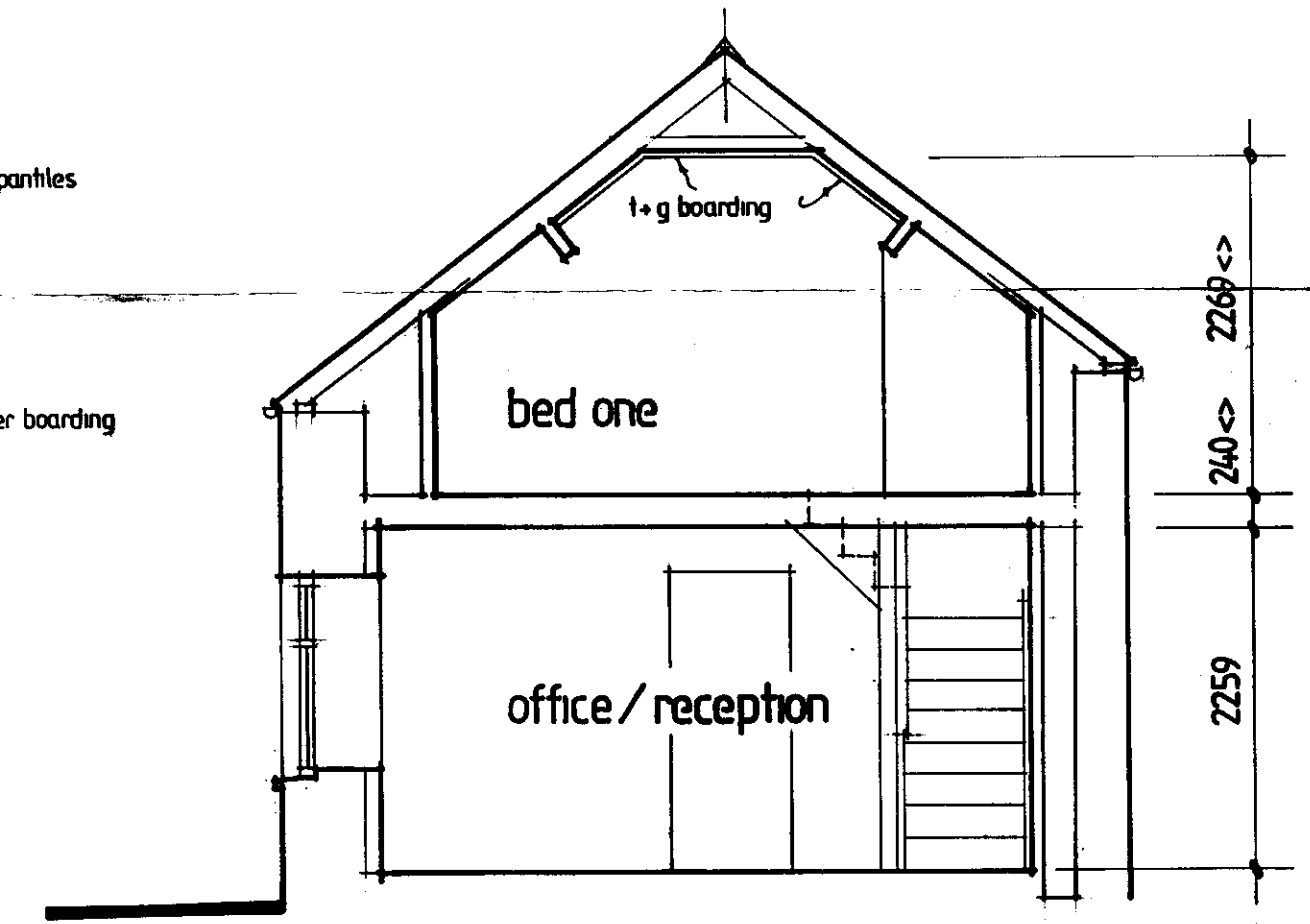
SOUTH ELEVATION SECTION B



GROUND FLOOR PLAN



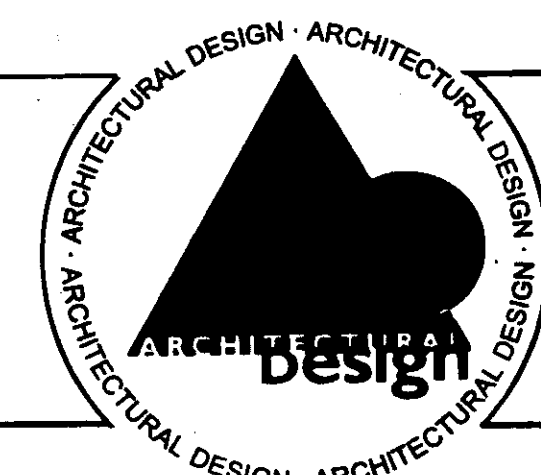
WEST ELEVATION



SECTION A

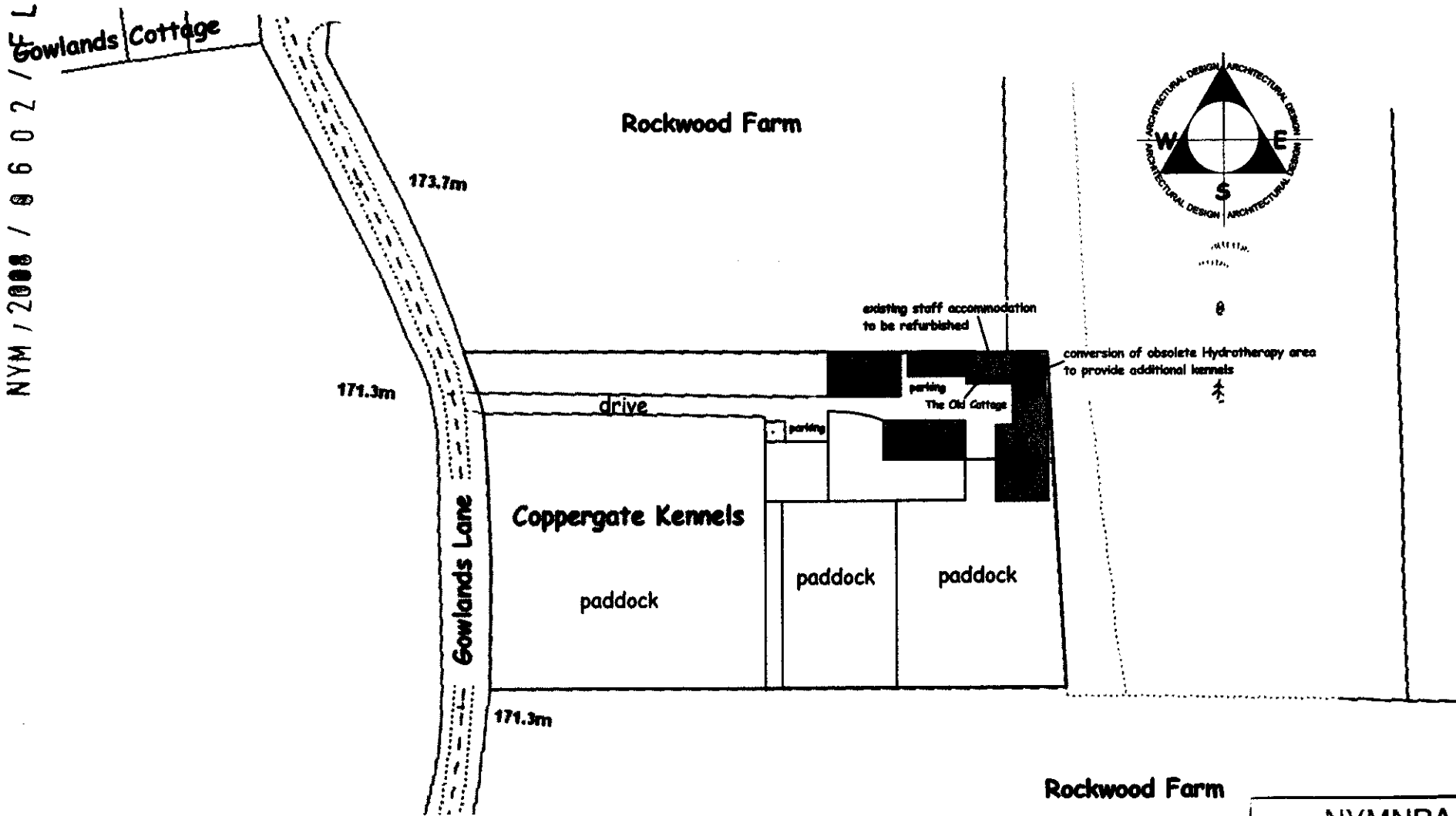
NYMNP
31 JUL 2008

RICHARD G WINN Architectural Services
 OLD BARN COTTAGE, MIDDLE FARM, MAIN STREET, ALLERSTON, PICKERING, NORTH YORKS, YO18 7PG
 PHONE-FAX: 01723 850300 MOBILE: 07790 723705 e-mail richard@winn-design.co.uk
 This drawing is the property of Architectural Design and must not be copied or otherwise reproduced



CHANGE OF USE OF THE OLD COTTAGE TO DWELLING Scale : 1.50
 PLUS CONVERSION OF THE HYDRO AREA TO FOUR Date : March 2008
 KENNELS, AT COPPERGATE KENNELS, SCARBOROUGH Drawn : R.G.W
 PLANS AS EXISTING Project : 1236-1A

NYM / 2008 / 0602 / FL



SITE LOCATION AND BLOCK PLAN Scale 1.1250

**CONVERSION OF OBSOLETE HYDROTHERAPY AREA TO PROVIDE ADDITIONAL KENNELS
AT COPPERGATE KENNELS, GOWLANDS LANE, CLOUGHTON, SCARBOROUGH**

<p>NYMNPA</p> <p>31 JUL 2008</p>



Grid Ref SE 99217,96160

08/0002 Pt. 1

North York Moors National Park Authority
The Old Vicarage
Bondgate
Helmsley
York
YO62 5BP

Telephone: 01439 770657
Email: dc@northyorkmoors-npa.gov.uk
Website: www.moors.uk.net

Application for Planning Permission. Town and Country Planning Act 1990

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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. Description of Proposed Works

Please describe the proposed works:

Variation of condition of the Hydrotherapy area to provide additional kennels

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Has building or works already been carried out or use of land already started? Yes No

If Yes, please state the date when building works or use were started (DD/MM/YYYY): (date must be pre-application submission)

Have the works been completed or change of use already occurred? Yes No

If Yes, please state when the works were completed or use occurred (DD/MM/YYYY): (date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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

Easting: Northing:

Description:

5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No
NYM / 2008 / 0602 / F L

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?

6. Access to the Site

Is a new or altered vehicle access proposed to or from the public highway? Yes No Unknown

Is a new or altered pedestrian access proposed to or from the public highway? Yes No Unknown

Are there any new public roads to be provided within the site? Yes No Unknown

Are there any new public rights of way to be provided within or adjacent to the site? Yes No Unknown

Do the proposals require any diversions /extinguishments and/or creation of rights of way? Yes No Unknown

If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan (s)/drawings(s)

7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste? Yes No Unknown

If Yes, please provide details:

Have arrangements been made for the separate storage and collection of recyclable waste? Yes No Unknown

If Yes, please provide details:

8. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? Yes No

If Yes please provide details:

9. Council Employees / Member

Is the applicant or agent related to any member of staff or elected member of the Council? Yes No

If Yes, please provide details:

10. Materials

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

	Existing (where applicable)	Proposed NYM / 2008 / 0602 / FL	Not applicable	Don't Know	Drawing references if applicable
Walls			<input type="checkbox"/>	<input type="checkbox"/>	
Roof			<input type="checkbox"/>	<input type="checkbox"/>	
Windows			<input type="checkbox"/>	<input type="checkbox"/>	
Doors			<input type="checkbox"/>	<input type="checkbox"/>	
Boundary treatments (e.g. fences, walls)			<input type="checkbox"/>	<input type="checkbox"/>	
Vehicle access and hard-standing			<input type="checkbox"/>	<input type="checkbox"/>	
Lighting			<input type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)			<input type="checkbox"/>	<input type="checkbox"/>	

Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?

Yes

No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

Drawing nos. 1236-1 and 3

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11. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	6	6	Nil
Light goods vehicles/ public carrier vehicles	1	1	Nil
Motorcycles	0	0	Nil
Disability spaces	1	1	Nil
Cycle spaces	4	4	Nil
Other (e.g. Bus)	N/A		
Other (e.g. Bus)	N/A		

12. Foul Sewage

Please state how foul sewage is to be disposed of:

- Mains sewer Cess pit
 Septic tank Other
 Package treatment plant Unknown

Are you proposing to connect to the existing drainage system? Yes No

If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):

13. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)

NYM/2008/0602/FL Yes No
 If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No

Will the proposal increase the flood risk elsewhere? Yes No Unknown

How will surface water be disposed of?

- Sustainable drainage system Existing watercourse
 Soakaway Pond/Lake
 Main sewer Unknown

14. Biodiversity and Geological Conservation

Is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to or near the application site?

a) Protected and priority species:

- Yes, on the development site
 Yes, on land adjacent to or near the proposed development
 No

b) Designated sites, important habitats or other biodiversity features:

- Yes, on the development site
 Yes, on land adjacent to or near the proposed development
 No

c) Features of geological conservation importance:

- Yes, on the development site
 Yes, on land adjacent to or near the proposed development
 No

15. Existing Use

Please describe the current use of the site:

Kennels and cattery

Is the site currently vacant? Yes No

If Yes, please describe the last use of the site:

N/A

When did this use end (if known)?
DD/MM/YYYY

(date where known may be approximate)

Does the proposal involve any of the following:

Land which is known to be contaminated? Yes No

Land where contamination is suspected for all or part of the site? Yes No

A proposed use that would be particularly vulnerable to the presence of contamination? Yes No

If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.

16. Trees and Hedges

Are there trees or hedges on the proposed development site? Yes No

And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes No

If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'.

17. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste? Yes No

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

By authorized collector on agency NYMNPA

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18. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units?
 If Yes please complete details of the changes in the tables below:

Yes No

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Proposed Housing							Existing Housing									
Market Housing	Not known	Number of Bedrooms					Total	Market Housing	Not known	Number of Bedrooms					Total	
		1	2	3	4+	Unknown				1	2	3	4+	Unknown		
Houses	<input type="checkbox"/>							Houses	<input type="checkbox"/>							
Flats and maisonettes	<input type="checkbox"/>							Flats and maisonettes	<input type="checkbox"/>							
Live-work units	<input type="checkbox"/>							Live-work units	<input type="checkbox"/>							
Cluster flats	<input type="checkbox"/>							Cluster flats	<input type="checkbox"/>							
Sheltered housing	<input type="checkbox"/>							Sheltered housing	<input type="checkbox"/>							
Bedsit/studios	<input type="checkbox"/>							Bedsit/studios	<input type="checkbox"/>							
Unknown type	<input type="checkbox"/>							Unknown type	<input type="checkbox"/>							
Totals (a+b+c+d+e+f+g)=								Totals (a+b+c+d+e+f+g)=								
Social Rented							Social Rented									
Social Rented	Not known	Number of Bedrooms					Total	Social Rented	Not known	Number of Bedrooms					Total	
		1	2	3	4+	Unknown				1	2	3	4+	Unknown		
Houses	<input type="checkbox"/>							Houses	<input type="checkbox"/>							
Flats and maisonettes	<input type="checkbox"/>							Flats and maisonettes	<input type="checkbox"/>							
Live-work units	<input type="checkbox"/>							Live-work units	<input type="checkbox"/>							
Cluster flats	<input type="checkbox"/>							Cluster flats	<input type="checkbox"/>							
Sheltered housing	<input type="checkbox"/>							Sheltered housing	<input type="checkbox"/>							
Bedsit/studios	<input type="checkbox"/>							Bedsit/studios	<input type="checkbox"/>							
Unknown type	<input type="checkbox"/>							Unknown type	<input type="checkbox"/>							
Totals (a+b+c+d+e+f+g)=								Totals (a+b+c+d+e+f+g)=								
Intermediate							Intermediate									
Intermediate	Not known	Number of Bedrooms					Total	Intermediate	Not known	Number of Bedrooms					Total	
		1	2	3	4+	Unknown				1	2	3	4+	Unknown		
Houses	<input type="checkbox"/>							Houses	<input type="checkbox"/>							
Flats and maisonettes	<input type="checkbox"/>							Flats and maisonettes	<input type="checkbox"/>							
Live-work units	<input type="checkbox"/>							Live-work units	<input type="checkbox"/>							
Cluster flats	<input type="checkbox"/>							Cluster flats	<input type="checkbox"/>							
Sheltered housing	<input type="checkbox"/>							Sheltered housing	<input type="checkbox"/>							
Bedsit/studios	<input type="checkbox"/>							Bedsit/studios	<input type="checkbox"/>							
Unknown type	<input type="checkbox"/>							Unknown type	<input type="checkbox"/>							
Totals (a+b+c+d+e+f+g)=								Totals (a+b+c+d+e+f+g)=								
Key worker							Key worker									
Key worker	Not known	Number of Bedrooms					Total	Key worker	Not known	Number of Bedrooms					Total	
		1	2	3	4+	Unknown				1	2	3	4+	Unknown		
Houses	<input type="checkbox"/>							Houses	<input type="checkbox"/>							
Flats and maisonettes	<input type="checkbox"/>							Flats and maisonettes	<input type="checkbox"/>							
Live-work units	<input type="checkbox"/>							Live-work units	<input type="checkbox"/>							
Cluster flats	<input type="checkbox"/>							Cluster flats	<input type="checkbox"/>							
Sheltered housing	<input type="checkbox"/>							Sheltered housing	<input type="checkbox"/>							
Bedsit/studios	<input type="checkbox"/>							Bedsit/studios	<input type="checkbox"/>							
Unknown type	<input type="checkbox"/>							Unknown type	<input type="checkbox"/>							
Totals (a+b+c+d+e+f+g)=								Totals (a+b+c+d+e+f+g)=								
Total existing residential units (A+B+C+D)=								Total proposed residential units (E+F+G+H)=								

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Total net gain / loss of residential units

19. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No

If you have answered Yes to the question above please add details in the following table:

Use class/type of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal floorspace to be lost by change of use or demolition (square metres)	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	<input checked="" type="checkbox"/>				
Shops	<input checked="" type="checkbox"/>				
Net tradeable area:	<input checked="" type="checkbox"/>				
A2	<input checked="" type="checkbox"/>				
Financial and professional services	<input checked="" type="checkbox"/>				
A3	<input checked="" type="checkbox"/>				
Restaurants and cafes	<input checked="" type="checkbox"/>				
A4	<input checked="" type="checkbox"/>				
Drinking establishments	<input checked="" type="checkbox"/>				
A5	<input checked="" type="checkbox"/>				
Hot food takeaways	<input checked="" type="checkbox"/>				
B1 (a)	<input checked="" type="checkbox"/>				
Office (other than A2)	<input checked="" type="checkbox"/>				
B1 (b)	<input checked="" type="checkbox"/>				
Research and development	<input checked="" type="checkbox"/>				
B1 (c)	<input checked="" type="checkbox"/>				
Light industrial	<input checked="" type="checkbox"/>				
B2	<input checked="" type="checkbox"/>				
General industrial	<input checked="" type="checkbox"/>				
B8	<input checked="" type="checkbox"/>				
Storage or distribution	<input checked="" type="checkbox"/>				
C1	<input checked="" type="checkbox"/>				
Hotels and halls of residence	<input checked="" type="checkbox"/>				
C2	<input checked="" type="checkbox"/>				
Residential institutions	<input checked="" type="checkbox"/>				
D1	<input checked="" type="checkbox"/>				
Non-residential institutions	<input checked="" type="checkbox"/>				
D2	<input checked="" type="checkbox"/>				
Assembly and leisure	<input checked="" type="checkbox"/>				
OTHER	<input type="checkbox"/>				
Please specify	<input type="checkbox"/>				
Hydrotherapy	<input type="checkbox"/>	48.75	48.75	48.75	Nil
Total					

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In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

Use class	Type of use	Not applicable	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
C1	Hotels	<input type="checkbox"/>			
C2	Residential institutions	<input type="checkbox"/>			
Other	Hostels	<input type="checkbox"/>			

20. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	Total full-time equivalent	Not known
Existing employees	Two	Nil	Two	
Proposed employees	Three	Nil	Three	

21. Hours of Opening

Please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday	Saturday	Sunday and Bank Holidays	Not known
Kennels	9 am to 6 pm	9 am to 6 pm	9 am to 6 pm	

22. Site Area

Please state the site area in hectares (ha)

23. Industrial or Commercial Processes and Machinery

Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:

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Is the proposal a waste management development? Yes No

If the answer is Yes, Please complete the following table:

	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	Please provide the maximum annual operational throughput of the following waste streams:
Inert landfill	<input type="checkbox"/>		
Non-hazardous landfill	<input type="checkbox"/>		
Hazardous landfill	<input type="checkbox"/>		
Energy from waste incineration	<input type="checkbox"/>		
Other incineration	<input type="checkbox"/>		
Landfill gas generation plant	<input type="checkbox"/>		
Pyrolysis/gasification	<input type="checkbox"/>		
Metal recycling site	<input type="checkbox"/>		
Transfer stations	<input type="checkbox"/>		
Material recovery/recycling facilities (MRFs)	<input type="checkbox"/>		
Household civic amenity sites	<input type="checkbox"/>		
Open windrow composting	<input type="checkbox"/>		
In-vessel composting	<input type="checkbox"/>		
Anaerobic digestion	<input type="checkbox"/>		
Any combined mechanical, biological and/or thermal treatment (MBT)	<input type="checkbox"/>		
Sewage treatment works	<input type="checkbox"/>		
Other treatment	<input type="checkbox"/>		
Recycling facilities construction, demolition and excavation waste	<input type="checkbox"/>		
Storage of waste	<input type="checkbox"/>		
Other waste management	<input type="checkbox"/>		
Other developments	<input type="checkbox"/>		
Please provide the maximum annual operational throughput of the following waste streams:			<div style="border: 1px solid black; padding: 5px; display: inline-block;"> NYMNPA 31 JUL 2008 </div>
Municipal			
Construction, demolition and excavation			
Commercial and industrial			
Hazardous			

If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.

24. Hazardous Substances

Does the proposal involve the use or storage of any of the following materials in the quantities stated below? Yes No Not applicable

If Yes, please provide the amount of each substance that is involved:

Acrylonitrile (tonnes) <input type="text"/>	Ethylene oxide (tonnes) <input type="text"/>	Phosgene (tonnes) <input type="text"/>
Ammonia (tonnes) <input type="text"/>	Hydrogen cyanide (tonnes) <input type="text"/>	Sulphur dioxide (tonnes) <input type="text"/>
Bromine (tonnes) <input type="text"/>	Liquid oxygen (tonnes) <input type="text"/>	Flour (tonnes) <input type="text"/>
Chlorine (tonnes) <input type="text"/>	Liquid petroleum gas (tonnes) <input type="text"/>	Refined white sugar (tonnes) <input type="text"/>

Other:

Other:

Amount (kilograms):

Amount (kilograms):

25. Certificates

One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form
CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which the application relates.

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Signed - Applicant:

[Redacted Signature]

Or signed - Agent:

Richard G Winn

Date (DD/MM/YYYY):

22 July 2008

CERTIFICATE OF OWNERSHIP - CERTIFICATE B

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to which this application relates.

Name of Owner	Address	Date Notice Served

Signed - Applicant:

[Redacted Signature]

Or signed - Agent:

[Redacted Signature]

Date (DD/MM/YYYY):

[Redacted Date]

CERTIFICATE OF OWNERSHIP - CERTIFICATE C

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that:

- Neither Certificate A or B can be issued for this application
- All reasonable steps have been taken to find out the names and addresses of the other owners (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of the land or building, or of a part of it, but I have/ the applicant has been unable to do so.

The steps taken were:

[Redacted Text]

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Name of Owner	Address	Date Notice Served

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

[Redacted Newspaper Name]

On the following date (which must not be earlier than 21 days before the date of the application):

[Redacted Date]

Signed - Applicant:

[Redacted Signature]

Or signed - Agent:

[Redacted Signature]

Date (DD/MM/YYYY):

[Redacted Date]

25. Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

I certify/ The applicant certifies that:

- Certificate A cannot be issued for this application
- All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so.

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The steps taken were:

[Empty box for steps taken]

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

[Empty box for newspaper name]

[Empty box for date]

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

[Empty box for applicant signature]

[Empty box for agent signature]

[Empty box for date]

AGRICULTURAL HOLDINGS CERTIFICATE

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of, an agricultural holding.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

[Empty box for applicant signature]

[Redacted signature] Richard G Winn

22 July 2008

B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

Name of Tenant	Address	Date Notice Served

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Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

[Empty box for applicant signature]

[Empty box for agent signature]

[Empty box for date]

26. Planning Application Requirements Checklist

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.

3 copies of a completed and dated application form:

The correct fee:

3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:

3 copies of a design and access statement:

3 copies of other plans and drawings or information necessary to describe the subject of the application:

3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings):

3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):

27. Declaration

We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

[Empty box for applicant signature]

[Redacted signature] Richard G Winn

22 July 2008

(date cannot be pre-application)

**ARCHITECTURAL
DESIGN** richard winn

DESIGN STATEMENT

VARIATION OF CONDITION FOR THE
HYDROTHERAPY AREA TO PROVIDE
SPECIAL NEED KENNELS

COPPERGATE KENNELS
GOWLANDS LANE, CLOUGHTON
SCARBOROUGH, NORTH YORKSHIRE

FOR

COPPERGATE KENNELS LTD.

NYMNP A

31 JUL 2008

RICHARD G WINN
ARCHITECTURAL DESIGN

Old Barn Cottage, Middle Farm, Main St. Allerston
North Yorkshire YO18 7PG tel:fax 01723 850300

DESIGN STATEMENT

VARIATION OF CONDITION OF THE HYDROTHERAPY AREA TO PROVIDE SPECIAL NEED KENNELS AT COPPERGATE KENNELS, GOWLANDS LANE, CLOUGHTON, SCARBOROUGH, NORTH YORKSHIRE YO13 0DU

References:

Architectural Design's drawing nos. 1236- 1 and 3.
Planning Application for work to The Old Cottage.
Recent photographs.

HISTORY

The property was purchased by the current owners as a going concern on 10 June 2006 who subsequently and as part of ongoing improvements to the facility, have undertaken an extensive tree and shrub planting scheme to help integrate the complex into the landscape. Sound insulation has also been added to the main kennel block. Future improvements under consideration include introducing solar panels and the possible installation of ground source heat pump to reduce carbon omissions. For other recent improvements, see the accompanying Planning Application for work to The Old Cottage.

Present and approved use

Hydrotherapy area only, as granted by approval ref: NYM4/024/0069C/PA

Proposed use

Four additional 'special need' kennels.

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JUSTIFICATION

Customers requiring such a facility have declined steadily over the past few years to the point whereby this large area, housing the Hydrotherapy pool, is now rarely used and to keep the pool heated is a considerable expense and waste of resources. However, the demand for the quality of kennelling provided at Coppergate has risen proportionately and in particular to provide 'special need' kennelling particularly for nervous dogs who need to be boarded away from the main kennel block.

As a consequence, the proposal is to remove the Hydrotherapy pool, filters, heaters and associated equipment and apply for a 'variation of condition' to provide four modern kennels for such animals.

DESIGN CONSIDERATIONS

The existing building:

The existing and relatively modern building, measuring approximately 6.5M x 7.0M internally, is ideal for conversion with the minimum internal alteration and no external alteration and, as such, the design considerations are not an issue. The new kennels will become an extension of the adjoining and larger kennel block and be sound insulated.

The proposals were discussed on site with the North York Moors Planning Officer, Hilary Saunders, and the variation is in accord with current policy.

Externally

No change

Access

There is no proposed change to the access from Low Road which complies with NYCC Highways requirements.

Parking

There is ample space for on site parking and turning. One disabled parking bay is to be provided as part of the proposals for The Old Cottage. (See separate Planning application).

Structural

The proposals incorporate strengthening the roof as highlighted during a site meeting with Maughan Associates (structural engineer).

Protected species survey

Not required.

Flood risk assessment

The property is not in a flood risk area.

<p>NYMNPA 31 JUL 2008</p>

Richard G Winn
Architectural Services
22 July 2008

VALIDATION CHECKLIST

PLANNING PERMISSION AND LISTED BUILDING CONSENT

For alterations, extension or demolition of a listed building



Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.

STANDARD REQUIREMENTS:

(1 original and 3 copies to be supplied unless that application is submitted electronically)

Completed application form	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Completed Certificate of Ownership, A, B, C or D as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 and by Regulation 6 of the Planning (Listed Building and Conservation Areas) regulations 1990.	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Location Plan at a scale of 1:2500 or 1:1250 with your application site edged red and any other land in your ownership edged in blue.	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Existing site layout plans at a scale of 1:100, 1:200 or 1:500 showing the site in relation to existing buildings and site boundaries. The plan should indicate where existing features of the site are located including existing buildings (indicating proposed demolitions), trees (identifying any proposed felling), means of access and type of enclosure (wall, fence, hedges) and shall show adjacent properties/buildings.	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Proposed site layout plans at a scale of 1:500, 1:200 or 1:100	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Existing and proposed elevations to a scale of 1:50 or 1:100 Requirements dependent on position of extension eg. no front elevation required for rear extension etc.	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Existing and proposed floor plans to a scale of 1:50 or 1:100 For each floor ie, ground and first floor required for two storey extension	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Roof plans to a scale of 1:50 or 1:100 If the proposal alters the existing roof	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Existing and proposed site sections and finished floor levels and site levels at a scale of not less than 1:100	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Design and Access Statement	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>

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Application fee YES NO
 Please consult our enclosed Schedule of Fees.
 Cheques are to be made payable to NYMNPA

Manufacturers specification/leaflet for proposals incorporating plant/machinery (swimming pools/wind turbines/satellite dishes/solar panels/rooflights) YES N/A

SOME OR ALL OF THE FOLLOWING INFORMATION MAY ALSO BE REQUIRED:

Biodiversity Survey and Report (Nature Conservation and Ecological Assessment) YES N/A

Flood Risk Assessments/ Sequential Test (flood zones) YES N/A

Statement of agricultural need YES N/A

Tree Survey/Arboriculture Assessment YES N/A
 Where ground based works within 2 metres of the crown spreads of any trees covered by Tree Preservation Order or tree located within a Village Conservation Area

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