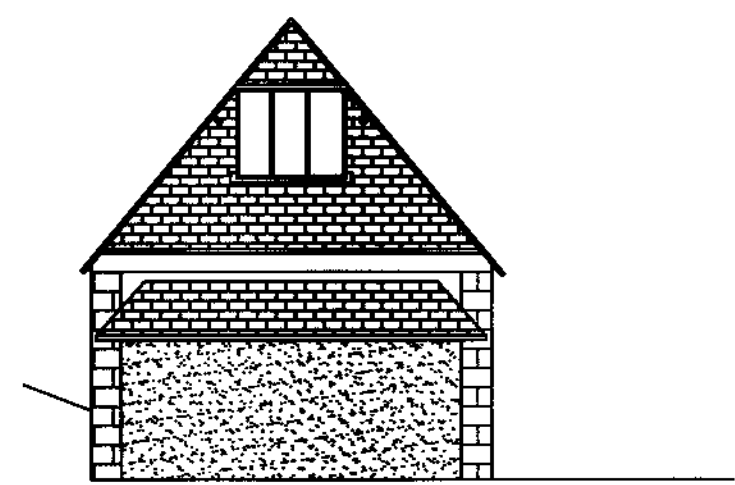
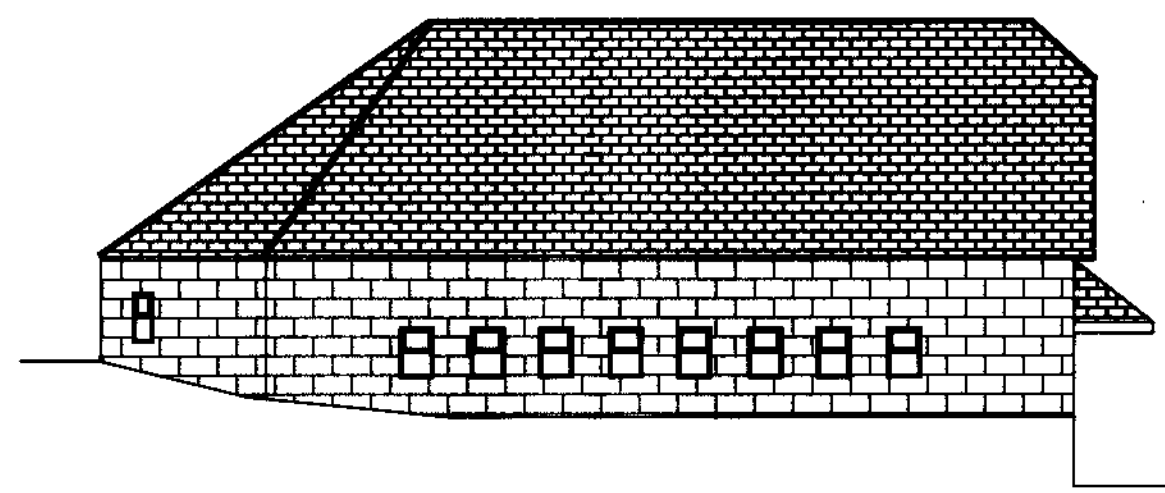


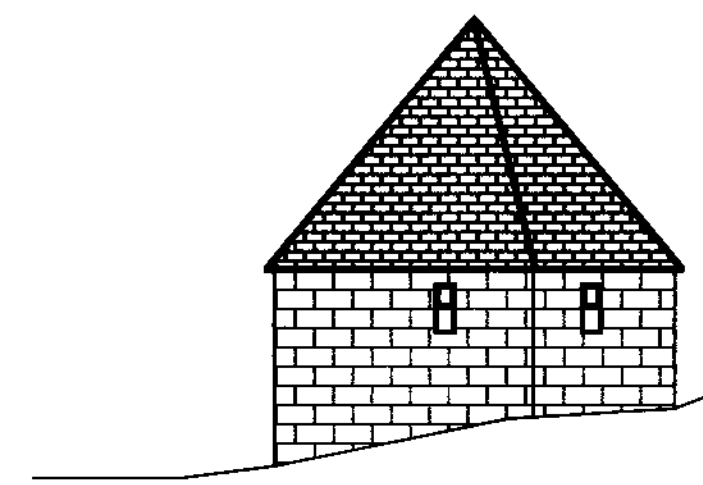
Side Elevation



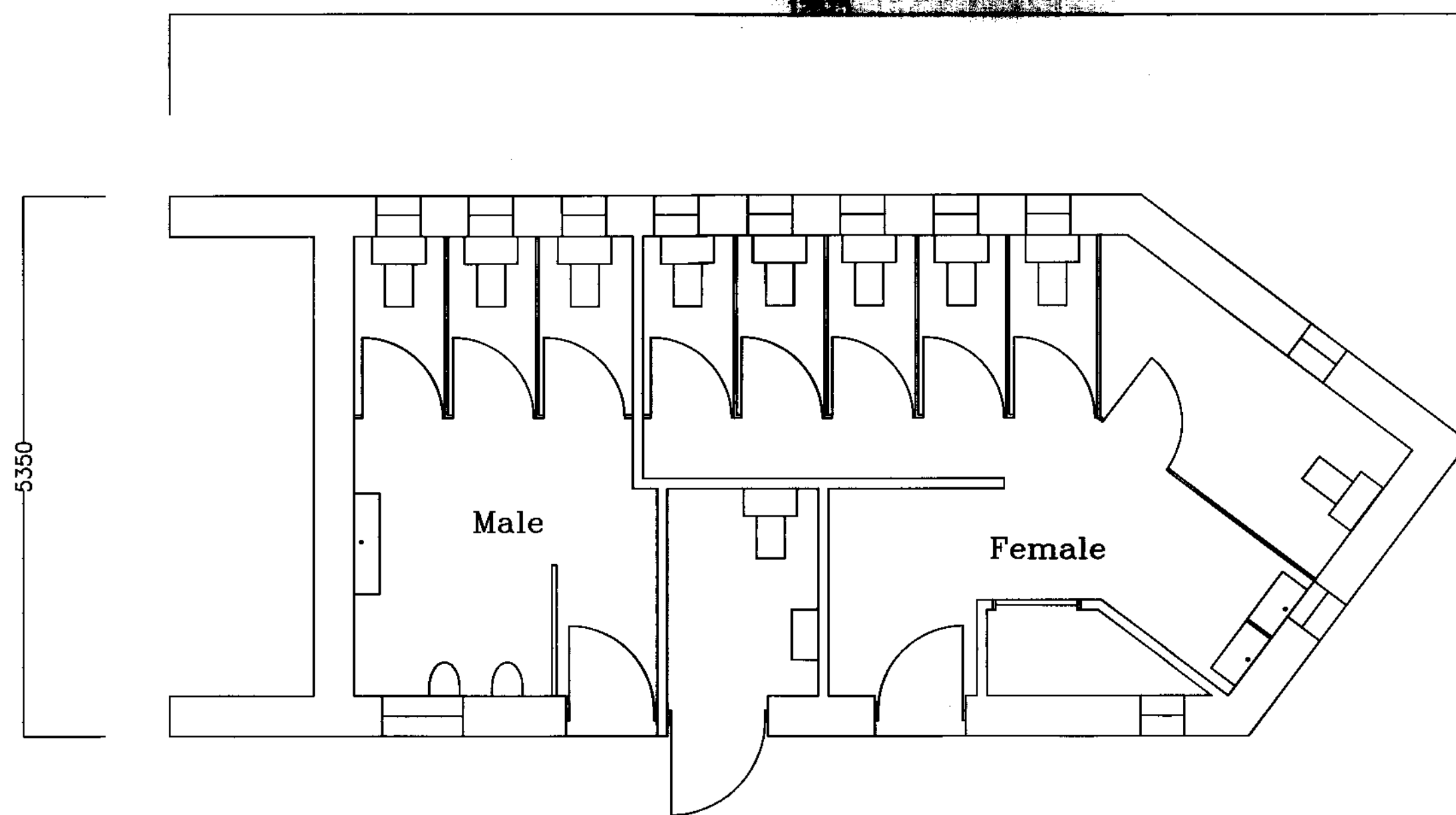
Front Elevation



Side Elevation



Rear Elevation



Layout Plan

CHECKED BY  
DRAWN BY  
SCALE 1:50 1:100  
DATE DRAWN October 2008  
Do Not Scale From Drawing

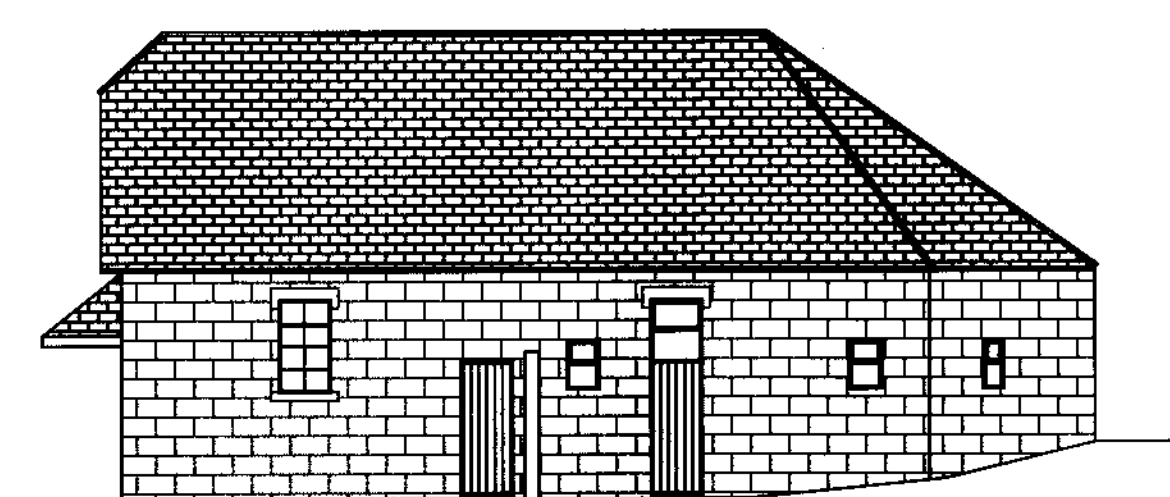
Robin Hoods Bay  
Public Toilets  
Whitby  
North Yorkshire

NYMNP  
27 NOV 2008

DRAWING NUMBER  
Proposed layout

SCARBOROUGH BOROUGH COUNCIL  
ARCHITECTURAL SERVICES

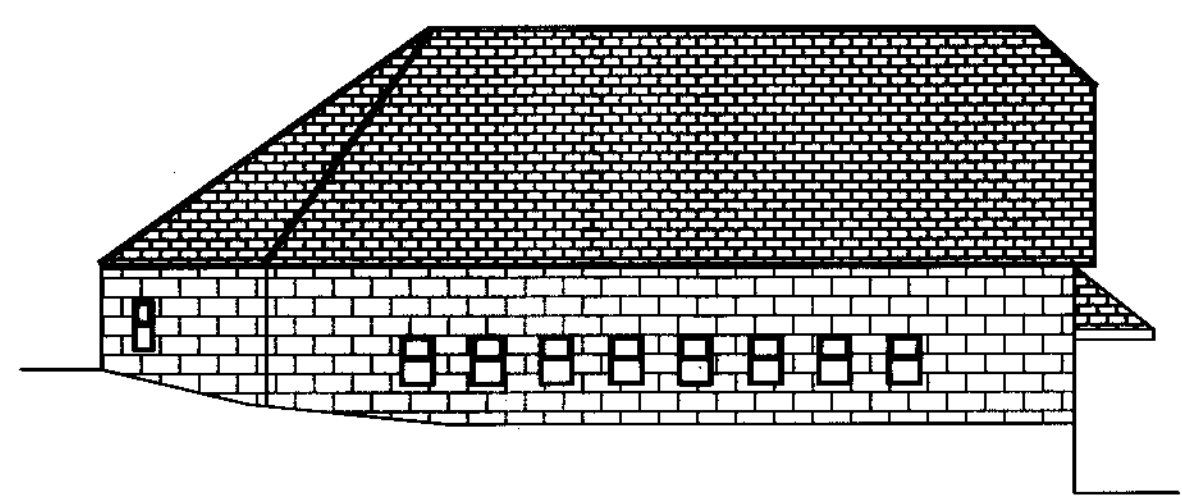
TOWN HALL  
ST. NICHOLAS STREET  
SCARBOROUGH  
YO11 2HG  
TEL 01723 232323  
FAX 01723 232433



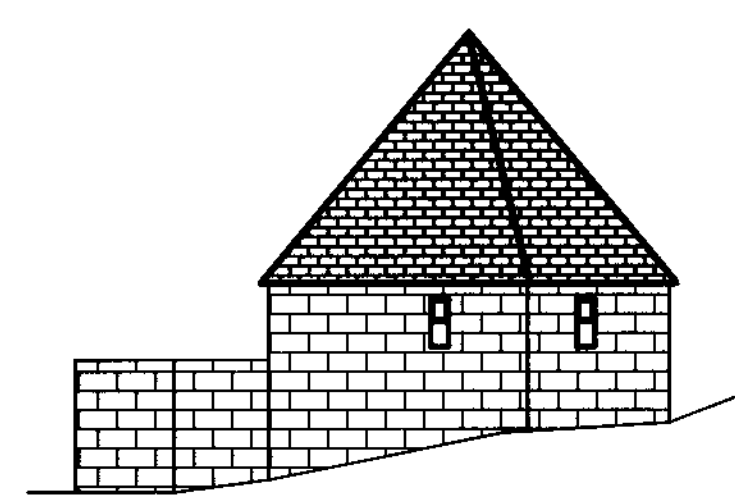
Side Elevation



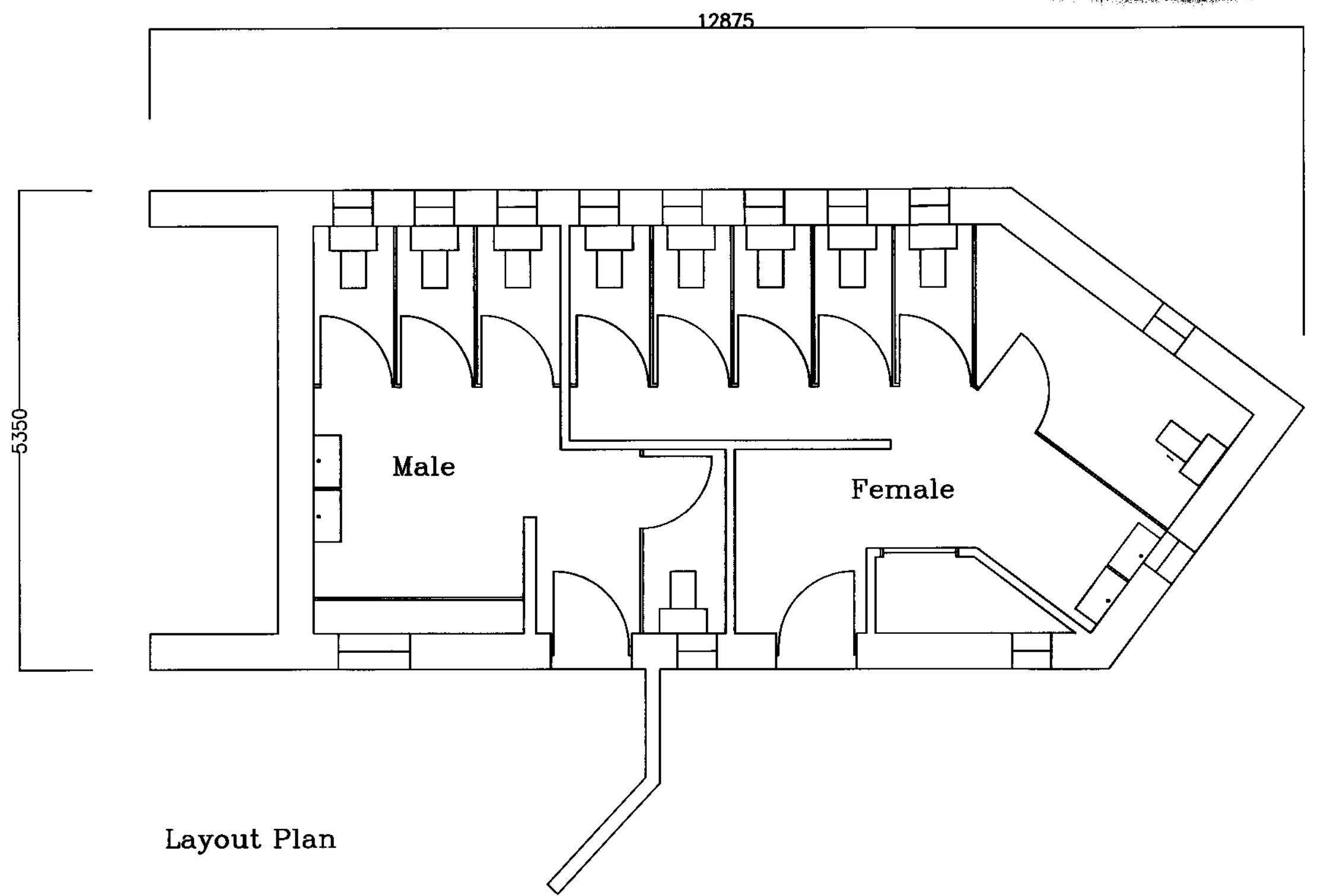
Front Elevation



Side Elevation



Rear Elevation



Layout Plan

CHECKED BY
DRAWN BY
SCALE 1:50 1:100
DATE DRAWN October 2008
Do Not Scale From Drawing

**Robin Hoods Bay  
Public Toilets  
Whitby  
North Yorkshire**

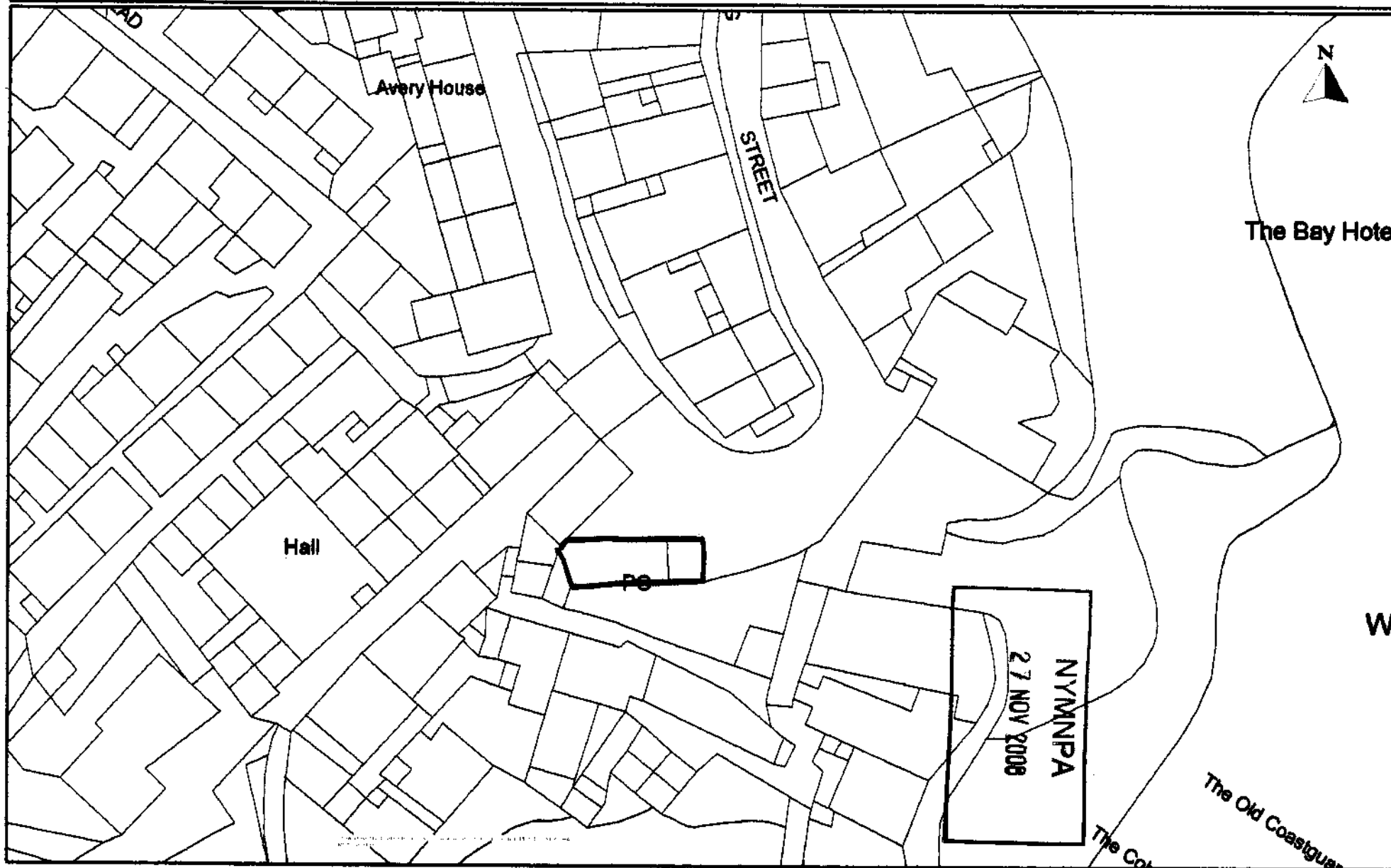
NYMNP 27 NOV 2008
----------------------

**DRAWING NUMBER**  
**Existing layout**

SCARBOROUGH BOROUGH COUNCIL  
ARCHITECTURAL SERVICES

TOWN HALL  
ST. NICHOLAS STREET  
SCARBOROUGH  
YO11 2HG  
TEL 01723 232323  
FAX 01723 232433

# SCARBOROUGH BOROUGH COUNCIL



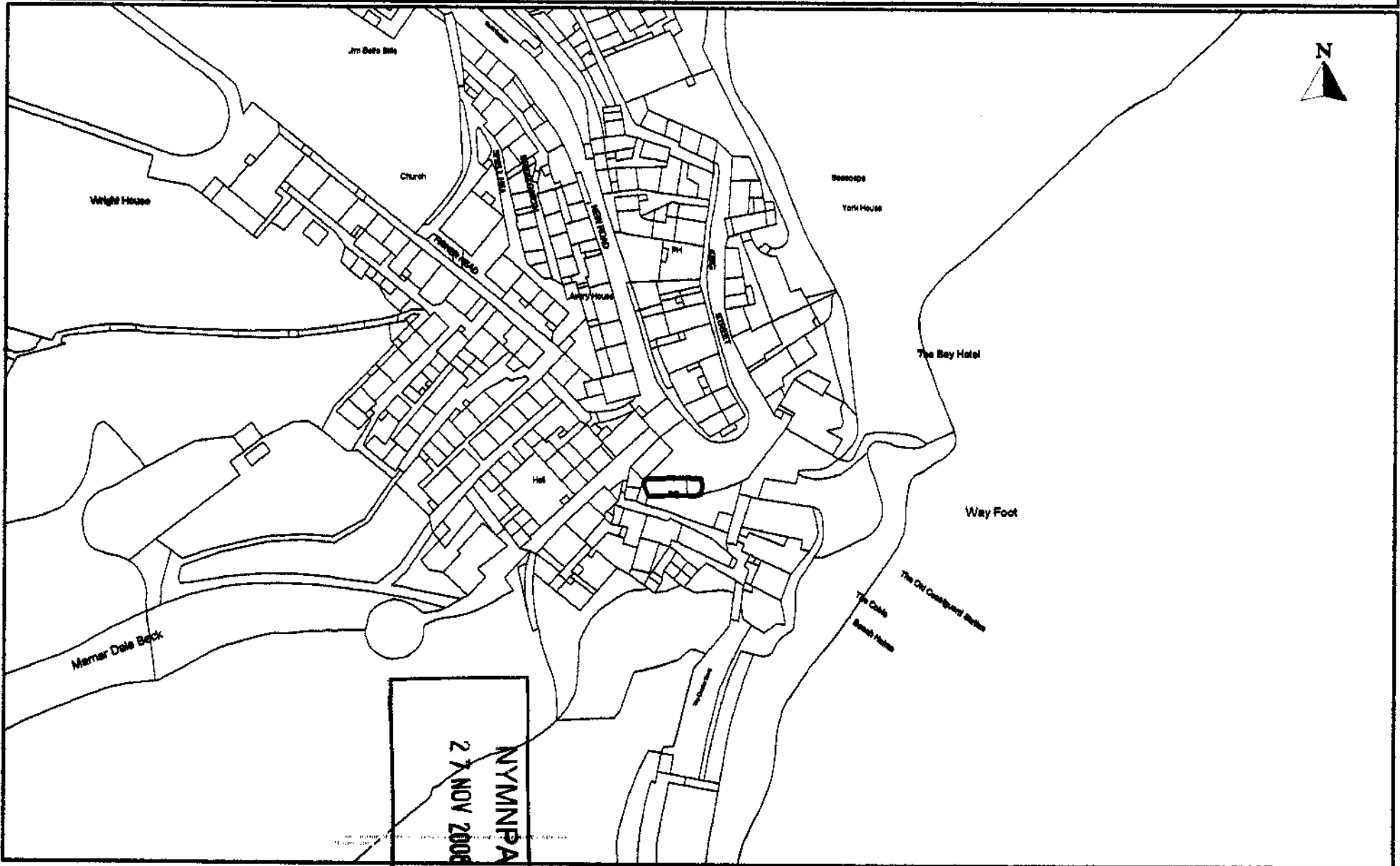
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Scarborough Borough Council MSA DSCA100, 2008.

Scale 1/500

Date 28/11/2008

NYM / 2008 / 0873 / EL

# SCARBOROUGH BOROUGH COUNCIL



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Scarborough Borough Council MSA DSCA100, 2008.

Scale 1/1250  
Date 28/11/2008

NYM / 2008 / 0 8 7 3 / F L



Grid ref SE98292, 04801 NYM / 2008 / 0 8 7 3 / FL

08/0873

North York Moors National Park Authority  
The Old Vicarage  
Borlase  
Helmsley  
York  
YO62 5BP  
Telephone: 01439 770657  
Email: dc@northyorkmoors-npa.gov.uk  
Website: www.moors.uk.net

Householder Application for Planning Permission for works or extension to a dwelling and conservation area consent.  
Town and Country Planning Act 1990  
Planning (Listed Buildings and Conservation Areas 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: PROPERTY SERVICES

Company (optional): SCARBOROUGH BOROUGH COUNCIL

Unit:  House number:  House suffix:

House name: TOWN HALL

Address 1: ST WILLOUGH STREET

Address 2: SCARBOROUGH

Address 3: NORTH YORKSHIRE

Town:

County:

Country:

Postcode: YO11 249

2. Agent Name and Address

Title:  First name:

Last name: ARCHITECTS SECTION

Company (optional): SCARBOROUGH BOROUGH COUNCIL

Unit:  House number:  House suffix:

House name: TOWN HALL

Address 1: ST WILLOUGH STREET

Address 2: SCARBOROUGH

Address 3: NORTH YORKSHIRE

Town: NYMNPA

County: 27 NOV 2008

Country:

Postcode: YO11 249

3. Description of Proposed Works

Please describe the proposed works:

CREATION OF DISABLED WC WITHIN EXISTING TOILET BLOCK

Has the work already started?

Yes  No **NYM/2008 / 0 8 7 3 / FL**

If Yes, please state when the work was started (DD/MM/YYYY):

(date must be pre-application submission)

Has the work been completed?

Yes  No

If Yes, please state when the work was completed (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: **PUBLIC TOILETS**

Address 1: **BOTTOM BANK**

Address 2: **ROBINHOODS BAY**

Address 3: **WHITBY**

Town: **NORTH YORKSHIRE**

County:

Postcode (optional): **YO22 4FW**

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

Easting:  Northing:

Description: **DISABLED WC ADDITION**

**5. 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?

**6. Pedestrian and Vehicle Access, Roads and Rights of Way**

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

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

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

If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s)

**7. Trees and Hedges**

Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your boundary?  Yes  No

If Yes, please mark their position on a scaled plan and state the reference number of any plan(s)/drawing(s):

**NYMNPA**  
**27 NOV 2008**

Will any trees or hedges need to be removed or pruned in order to carry out your proposal?  Yes  No

If Yes, please show on your plans, indicating the scale, which trees by giving them numbers e.g. T1, T2 etc and state the reference number of the plan(s) /drawing(s) and indicate the scale:

**8. Parking**

Will the proposed works affect existing car parking arrangements?  Yes  No

If Yes, please describe:

**9. Council Employee / 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: / 0 8 7 9 / F L

**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	Not applicable	Don't Know	Drawing references if applicable
Walls	STONE	STONE	<input type="checkbox"/>	<input type="checkbox"/>	
Roof			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Windows	WHITE PAINTED TIMBER	TO MATCH	<input type="checkbox"/>	<input type="checkbox"/>	
Doors	WHITE PAINTED TIMBER	TO MATCH.	<input type="checkbox"/>	<input type="checkbox"/>	
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Vehicle access and hard-standing		<div style="border: 2px solid black; padding: 5px; display: inline-block;">                     NYMNPA 27 NOV 2008                 </div>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)			<input checked="" 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:

Drawgs 1+2 , D+A statemt . Local plan

**1. Explanation For Proposed Demolition Work**

Why is it necessary to demolish all or part of the building(s) and or structure(s)?

ALTERATION

**2. Certificates (continued)**

CERTIFICATE OF OWNERSHIP - CERTIFIED 2008 / 08 / 3 / FL

Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

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.

The steps taken were:

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):

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

**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):

26<sup>th</sup> Nov 08

(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
		NYMNP 27 NOV 2008

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

**3. 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: <input checked="" type="checkbox"/>  | 3 copies of a design and access statement where proposed works fall within one of the following designated areas: <input checked="" type="checkbox"/> <ul style="list-style-type: none"> <li>• National Park</li> <li>• Site of special scientific interest</li> <li>• Conservation area</li> <li>• Area of outstanding natural beauty</li> <li>• World Heritage Site</li> <li>• The Broads</li> </ul> | The correct fee: <input type="checkbox"/> w/a  |
| 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: <input checked="" type="checkbox"/> |  | 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): <input checked="" type="checkbox"/>        |
| 3 copies of other plans and drawings or information necessary to describe the subject of the application: <input type="checkbox"/>   |  | 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable): <input checked="" type="checkbox"/> |

**4. 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:

Date (DD/MM/YYYY):

26<sup>th</sup> Nov 08



**15. Applicant Contact Details**

Telephone numbers

Country code: National number: Extension number:

--	--	--

Country code: Mobile number (optional):

--	--

Country code: Fax number (optional):

--	--

Email address (optional):

--

**16. Agent Contact Details**

Telephone numbers NYM / 2008 / 0 8 7 3 / FL

Country code: National number: Extension number:

--	--	--

Country code: Mobile number (optional):

--	--

Country code: Fax number (optional):

--	--

Email address (optional):

--

**17. Site Visit**Can the site be seen from a public road, public footpath, bridleway or other public land?  Yes  NoIf 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:

--

<p><b>NYMNPA</b></p> <p><b>27 NOV 2008</b></p>
--

**Design & Access Statement for**  
**Robin Hoods Bay Toilet Block**

NYMNP

27 NOV 2008

**Design & Access Statement for**  
**Robin Hood Toilet Block, Bottom Bank**

**Client Details**

Property Services  
Scarborough BC  
Town Hall  
St Nicholas Street  
Scarborough  
North Yorkshire  
YO11 2HG

**Owner Details**

Scarborough Borough Council  
Town Hall  
St Nicholas Street  
Scarborough  
North Yorkshire  
YO11 2HG

**Agent Details**

Scarborough Borough Council  
Architects Section  
Town Hall  
St Nicholas Street  
Scarborough  
North Yorkshire  
YO11 2HG



**Site Address**

Toilet Block  
Bottom Bank  
Robin Hoods Bay  
Whitby  
North Yorkshire  
YO22 4FW

## **Description**

The property a stone building that houses both male & female public facilities.

## **Proposed Design**

The proposed scheme add a disabled WC to the block allowing the greater use of the facilities for disabled persons who cannot access the building at the moment.

## **Philosophy & Approach**

This approach will keep the aesthetic vernacular of the property, whilst ensuring that the design & standards are maintained

## **Consultation**

The Parish council have been informed & are in full agreement. They have been provided with detailed drawings & specs throughout the schemes design.

NYMNPA

27 NOV 2008

## **Design Standards**

The following have been followed & consulted in the preparation of the scheme: -

- The Building Regulations
- Planning Policy
- The Disabled Discrimination Act
- CABE Gov't Policy interpretation
- Guidance on changes to the Development Control System circular
- Access by Design Website
- Part M Of the Building Regs ref disabled access

## **Conclusion**

**It is therefore concluded that the design is sympathetic to the vernacular & the style of the area and has been designed to compliment the surrounding areas without causing detrimental impact & still maintain the 'seaside' feel.**

**NYMNPA  
27 NOV 2008**

# VALIDATION CHECKLIST

## HOUSEHOLDER PERMISSION AND CONSERVATION AREA CONSENT

for works, extensions or demolition in Conservation Areas



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 the 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.	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 1:500, 1:200 or 1:100 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 checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Proposed site layout plans at a scale of 1:500, 1:200 or 1:100	YES <input checked="" type="checkbox"/>	N/A <input 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 plans 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 proposed development alters the existing roof	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Existing and proposed site sections and finished floor level and site levels to a scale of 1:50 or 1:100	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Design and Access Statement	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Application fee Please consult our enclosed Schedule of Fees. Cheques are to be made payable to NYMNP	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Manufacturers specification/leaflet, for proposals incorporating plant/machinery (swimming pools/wind turbines)	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

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27 NOV 2008

**ADDITIONAL REQUIREMENTS (where likely to be relevant to the development proposed)**

- |   |                              |   |
|---|------------------------------|---|
| <b>Biodiversity Survey and Report</b>   | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| <b>Structural Survey</b>  | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| <b>Flood Risk Assessments/ Sequential Test (flood zones)</b>  | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| <b>Tree Survey/Arboriculture Assessment</b><br>Where ground based works within 2 metres of the crown spreads<br>of any trees covered by Tree Preservation Order or tree located in<br>a village Conservation Area | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |

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