

NZ 86917,07058

PH 09/294

North York Moors National Park Authority The Old Vicerage Bondgate Helmstoy York

Telephone: 01439 770657 Email: designethyorkmoork-npa.gov uk Websile: www.moore.uk.net

Householder Application for Planning Permission for works or extension to a dwelling.

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. Applic	ant Nam	ie and Addre	55	2. Agen	t Name ai	nd Address		
Title;	ME	First name:	W	Title:	ME	First name:	W	
Last name:	WALKER		Last name	HENDERSON				
Company (optional):				Company (optional):	SPB	CTOUM PA	55IGN	<u> </u>
Unit:		House number:	House suffix:	Unit:		House number:	Z	House suffix:
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Address 2:	*****			Address 2:				NYMNPA
Address 3:	· · · · · · · · · · · · · · · · · · ·			Address 3:				- 6 MAY 2009
Town:	SLE	16413		Town;	SAL	THURN		D HAL COOO
County:	Ν. `	/OEKS		County:	CLE	MELAND		
Country:				Country:				
Postcode:	Y02	2. 5 <i>DP</i> .		Postcode:	TSIZ	IFB		
3. Descri	ption of	Proposed W	orks					
Please descr	ibe the pr	oposed works:						
		FR	ont # Re	sar bedi	Moos	DOKMER		
		EX	TENSIONS					il
			-					
						<del></del>		112:50 \$ \$Nension: 14;5

3. Description of Proposed Works (continued)	
Has the work already been started without planning permission?	☐ Yes ☑ No
If Yes, please state when the works were started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed without planning permission?	☐ Yes 🗹 No
If Yes, please state when the works were completed (DD/MM/YYYY):	(date must be pre-application submission)
4. Site Address Details	5. Pedestrian and Vehicle Access. Roads and Rights of Way
Please provide the full postal address of the application site.	is a new or altered vehicle access
Unit: House House suffice	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House paine:	proposed to or from the public highway? Yes No
Address 1: I BURNDALE LANE	Do the proposals require any diversions, extinguishments and/or creation of public stants of way?
Address 2:	(m)
Address 3:	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):
Town: SLUIGHTS	
County: N. Yorks	
Bassanda	
(optional): YOZZ SDP	
6. Pre-application Advice	7. Trees and Hedges
Has assistance or prior advice been sought from the local authority about this application?	Are there any trees or hedges on your own
	property or on adjoining properties which are within falling distance of your boundary? Yes Yes No
If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this	# Vac alasta mark their position on a scaled
application more efficiently).	plan and state the reference number of any partner drawings:
Please tick if the full contact details are not known, and then complete as much possible:	plan and state the reference number of any part or drawings:
Officer name:	a MAY LE
	1 -6.
Reference:	Will any trees or hedges need
	to be removed or pruned in
Date (DD MM YYYY); (must be pre-application submission)	
Advice given:	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 any plans or drawings:
}	
	1
8. Parking Will the proposed works affect	Council Employee , Member     Is the applicant or agent related to any member of staff or elected.
existing car parking arrangements? Yes No	member of the Council?
If Yes, please describe:	If Yes, please provide details:
If Yes, please describe:	L ' ( <u></u> ) '''
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If Yes, please describe:	L ' ( <u></u> ) '''

\$13are 2867/09/17 09:52:50 \$ 5Revision: 1,43 \$

10. Materials fapplicable, please sta	te what materials are to be used ex	sternally. Include type, colour and name for eac	h mate	rial:	
	Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
Walls		PLAIN TILE HANGING, TO DORMERS			PROPOSED ELEMATION SHT 5
Raof	,	TILES AS MAN	С		#
Windows	,	TO MATCH EX			ts.
Doors			₫		
Boundary treatments (e.g. fences, walls)		NYMNPA	₹		
Vehicle access and hard-standing		- 6 MAY 2009	1		
Lighting			<b>*</b>		
Others (please specify)					
Yes, please state refer	rences for the plan(s)/drawing(s)/de	lan(s)/drawing(s)/design and access statement? esign and access statement:  EX ELEVATIONS SI SHT   PROPOSED ELEVATION 1. 2 PROPOSED ELEVATION EXEF PROPOSED ECONF	173 W	SHT'	5

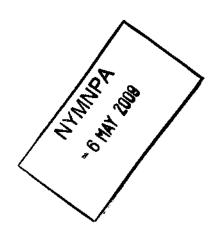
DESIGN & ACCESS STATEMENT

SOME 2007/05/11 09:53:50 \$ \$Revision: 1:43 \$

11 Certificates				
One Certificate A, B, C, or D, must	be completed, tog	ather with the Agricul	tural Holdings Certificate witi	this application form
Town and Country Blo		E OF OWNERSHIP - CEI	RTIFICATE A 1) Order 19 <del>9</del> 5 Certificate unde	r Articia 7
I certify/The applicant certifies that on	the day 21 days be	fore the date of this app	lication nobody except myself/	the applicant was the
owner (owner is a person with a freehold	Interest or leasehol	ld interest with at least 7 y	ears left to run) of any part of th	e land or building to
which the application relates.  Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
	1			2/5/09
	<u> </u>		······································	213104
		E OF OWNERSHIP - CER		
Town and Country Pla I certify/ The applicant certifies that I i	nning (General De	evelopment Procedure	) Order 1995 Certificate unde	r Article 7 d below) who on the day
21 days before the date of this applicat	ion, was the owner	r (owner is a person with a	o freehold interest or leasehold in	iterest with at least 7 years
left to run) of any part of the land or bu	lding to which this			24
Name of Owner	<u></u>	Address		Date Notice Served
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Signed - Applicant:		Or signed - Agent:	*	Date (DD/MM/YYYY):
	I	}		1 1
		E OF OWNERSHIP - CER		
			ITIFICATE C ) Order 1995 Certificate unde	r Article 7
I certify/ The applicant certifies that:  Neither Certificate A or B can be	nning (General De se issued for this ap	evelopment Procedure oplication	) Order 1995 Certificate unde	-
I certify/ The applicant certifies that:  Neither Certificate A or B can be All reasonable steps have been tak	nning (General De se issued for this ap on to find out the r	evelopment Procedure plication names and addresses of t	Order 1995 Certificate unde the other owners (owner is a per	son with a freehold
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11. Certificates (continued)		
Town and Country P I certify/ The applicant certifies that:  Certificate A cannot be issue:  All reasonable steps have bedate of this application, was the owne	d for this application on taken to find out the names and addre	fure) Order 1995 Certificate under Article 7 esses of everyone else who, on the day 21 days before the stor leasthold interest with at least 7 years left to run) of any
Notice of the application has been put (circulating in the area where the land Signed - Applicant:  Town and Country Plant (A) None of the land to which the Signed - Applicant:  Bill have/ The applicant has given	Or signed - Agent:  AGRICULTURAL HOLDINGS CE  AGRICULTURAL HOLDINGS CE  Anning (General Development Procedu  Ist Complete Either A or B  Application relates is, or is part of, an agric  Or signed - Agent:	cultural holding.  Date (DD/MM/YYYY):  2   S   O    Description myself/ the applicant who, on the day21 days.
before the date of this application, was listed below:  Name of Tenant	as a tenant of an agricultural holding on a	all or part of the land to which this application relates.  Date Notice Served
		NYMNPA 8 MAY 2009
Signed - Applicant:	Or signed - Agent:	Date (DO/MM/YYYY):
12. Planning Application Req. Please read the following checklist to a information required will result in you the Local Planning Authority has been 3 copies of a completed and dated application form:  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:  3 copies of other plans and drawings or information necessary to describe the subject of the application:	make sure you have sent all the information rapplication being deemed invalid. It will	Ownership Certificate
13. Declaration  I/we hereby apply for planning permis information.  Signed - Applicant:	sion/consent as described in this form an Or signed - Agent:	Date (DD/MM/YYYY):  2(5 / 09 (date cannot be pre-application)

14. Applicant Contact Details	15. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:  O 1947 8(178)  Country code: Mobile number (optional):  O79 175 32861  Country code: Fax number (optional):  Email address (optional):	Country code: National number: Extension number:  Country code: Mobile number loptional):  Country code: Fax number (optional):  Email address (optional):  SPECIEUM DESIGN® HOTMAK. COM
16. 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:
12. Planning Application Requirements - Checklist  Please read the following checklist to make sure you have sent all the information required will result in your application being deemed investigation being de	alid. It will not be considered valid until all information required by The original and 3 copies of the following documents:  A design and access statement where proposed works fall within one of the ural Holdings)  Output  National Park



Mr. W. Walker 36 Iburndale Lane Sleights North Yorkshire Y022 5DP

Tel: (01947) 811781

NYMNPA -6 MAY 2009

# Proposed Front & Rear Bedroom Dormer Window Extensions to No 36 Iburndale Lane, Sleights

**Design and Access Statement** 

# **Design and Access Statement**

NYMNPA -6 MAY 2009

# 1. The Design Elements:

### 1.1 Existing Use

Single storey /part two storey dwelling. The first floor bedrooms are within the roof void with gable windows, accessed by the two storey element of the dwelling containing the staircase, landing & rear bathroom.

### 1.2 Scope of the works

The proposals are for front & rear dormers to both first floor bedrooms.

### 1.3: Use

No change of use is proposed.

# 1.4 Layout

The layout is as shown on the proposed first floor plan, sheet 4 & accompanying elevations, sheet 5.

### 1.5 Scale

The proposed dormers have been designed to be in keeping with the scale of the main dwelling roof, & subordinate to the existing two storey elements of the dwelling. The dormers have pitched roofs with the ridge heights set below the existing ridge lines.

# 1.6 Landscaping

There is to be no proposed landscaping.

## 1.7 Appearance

The exterior of the dormers are to be clad in plain tile hanging, with window style to match existing windows. Tiles to the pitched roofs are to match the existing roof covering

### 2. The Access Elements:

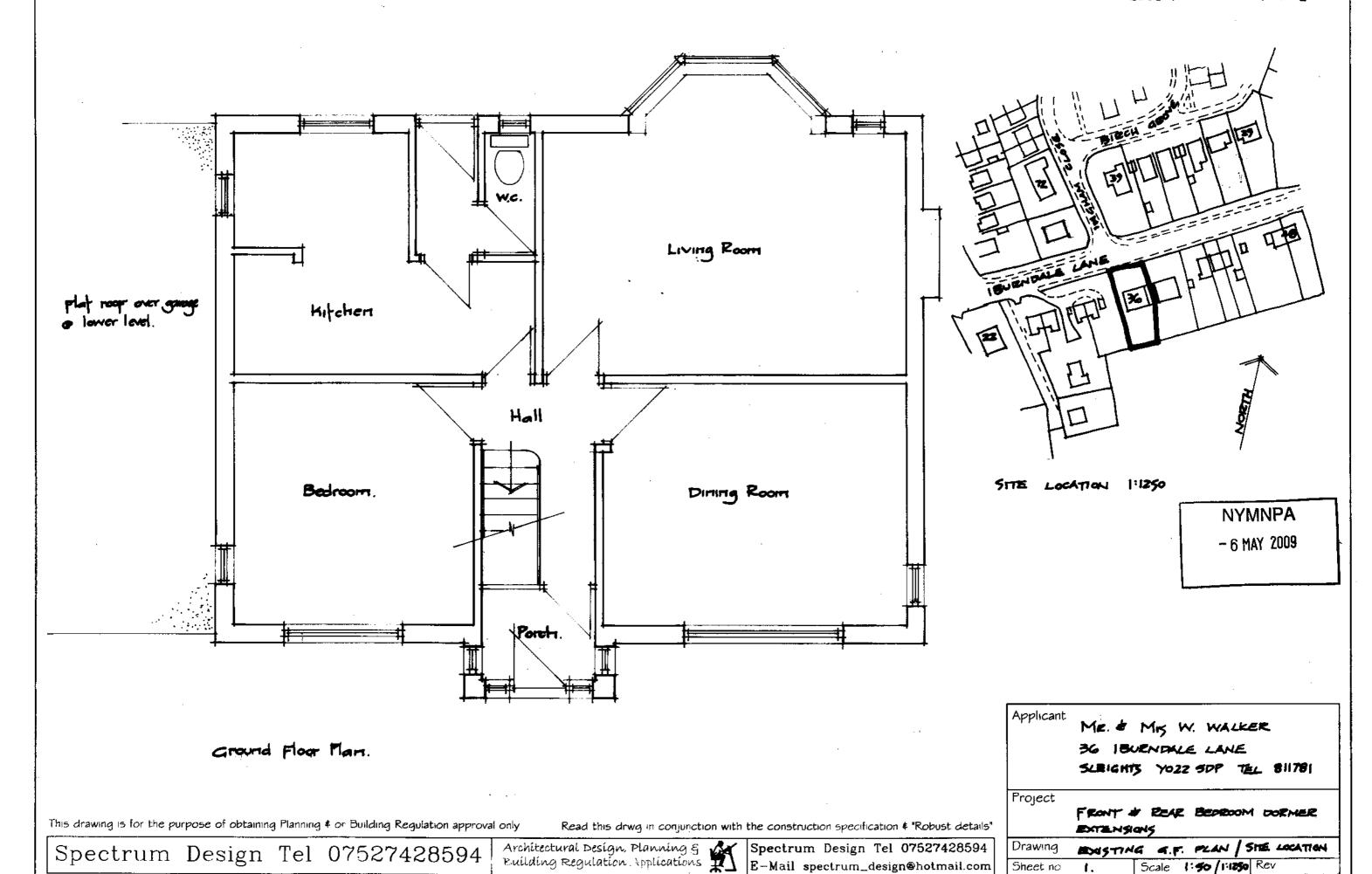
NYMNPA

-6 MAY 2009

### 2.1 Access

All existing accesses to the dwelling are to remain unaltered.

Scale 1:50/1:1250 Rev



E-Mail spectrum\_design@hotmail.com

Sheet no

**NYMNPA** -6 MAY 2009

FIRST FLOOR PLAN

This drawing is for the purpose of obtaining Planning \$\psi\$ or Building Regulation approval only

Read this drwg in conjunction with the construction specification \$ "Robust details"

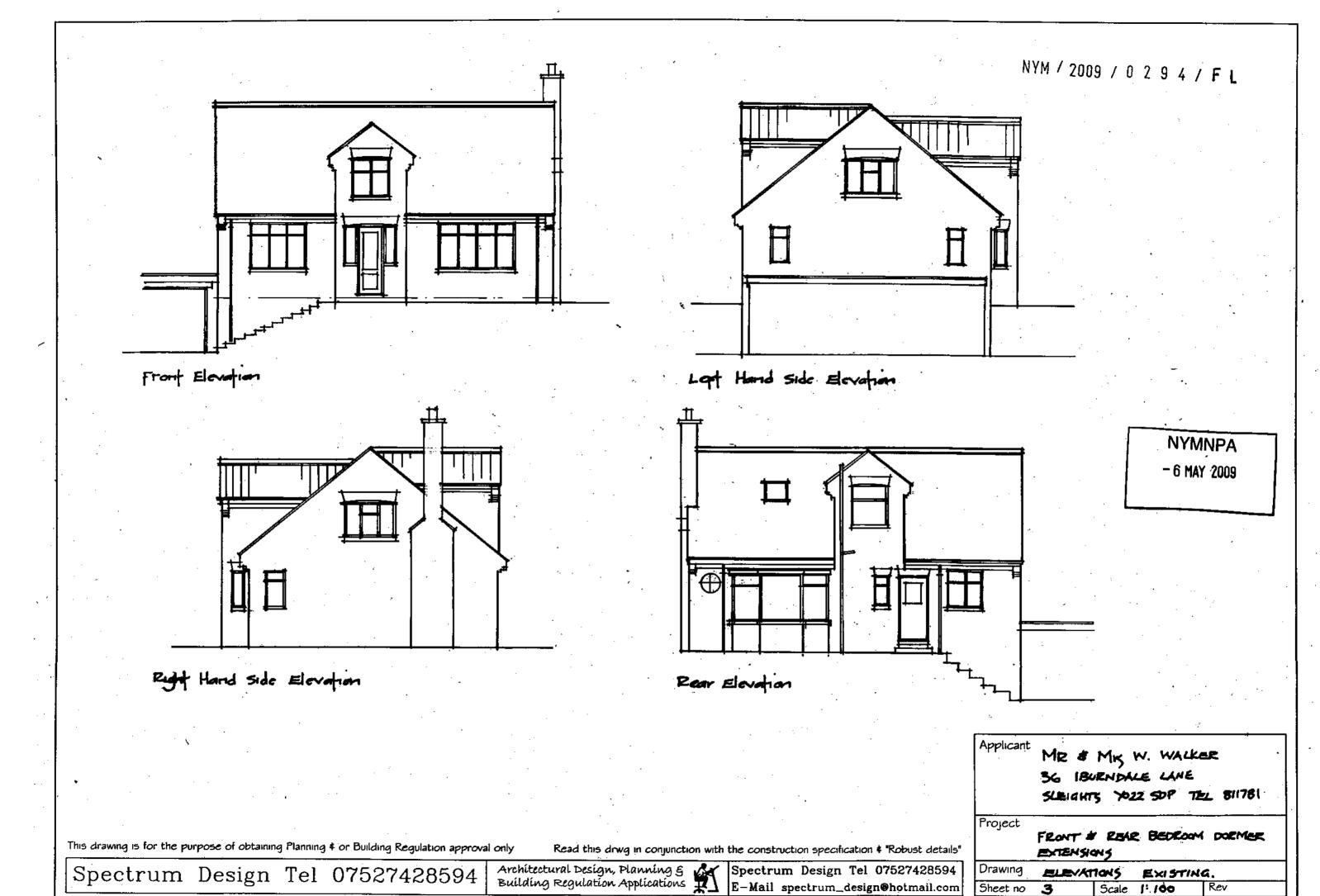
Spectrum Design Tel 07527428594

Architectural Design, Planning & Spectrum Design Tel 07527428594
Building Regulation Applications E-Mail spectrum\_design@hotmail.com E-Mail spectrum\_design@hotmail.com

MR & Mry W. WALKER 36 IBURNDALE LANE SLEIGHTS YOUZE SOP TEL 811781 Project FRONT & REAR BEDROOM DORMER EXTENSIONS Drawing ENSTING F.F. PLAN

Scale 1:50

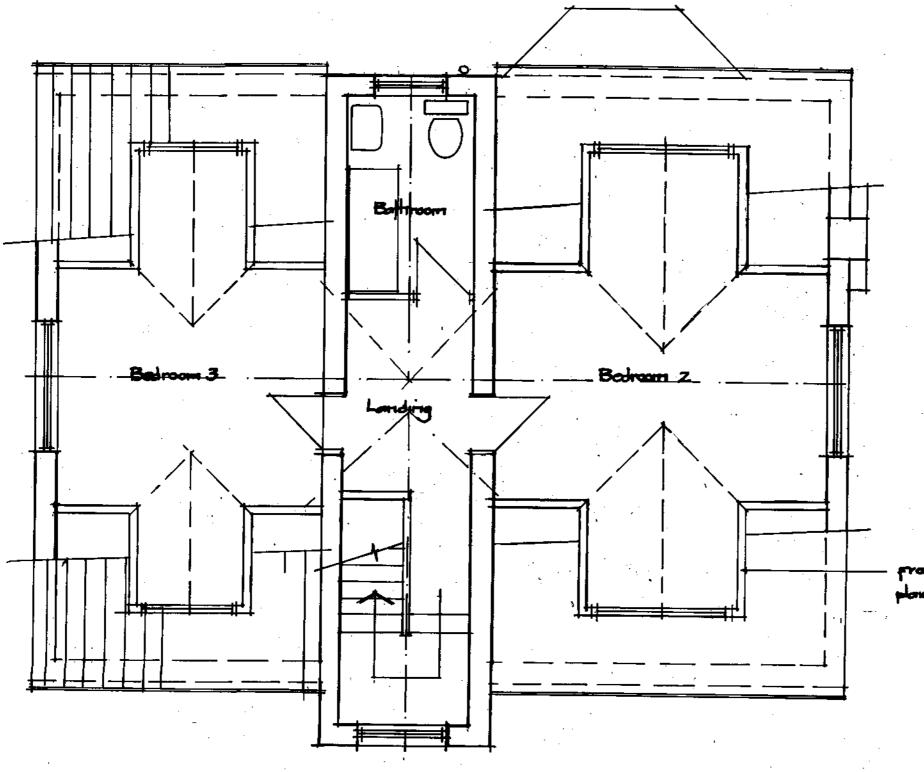
Sheet no



E-Mail spectrum\_design@hotmail.com

Scale 1: 100

Sheet no



**NYMNPA** -6 MAY 2009

plan file tranging externally

FIRST FLOOR PLAN

This drawing is for the purpose of obtaining Planning # or Building Regulation approval only

Read this drwg in conjunction with the construction specification # "Robust details"

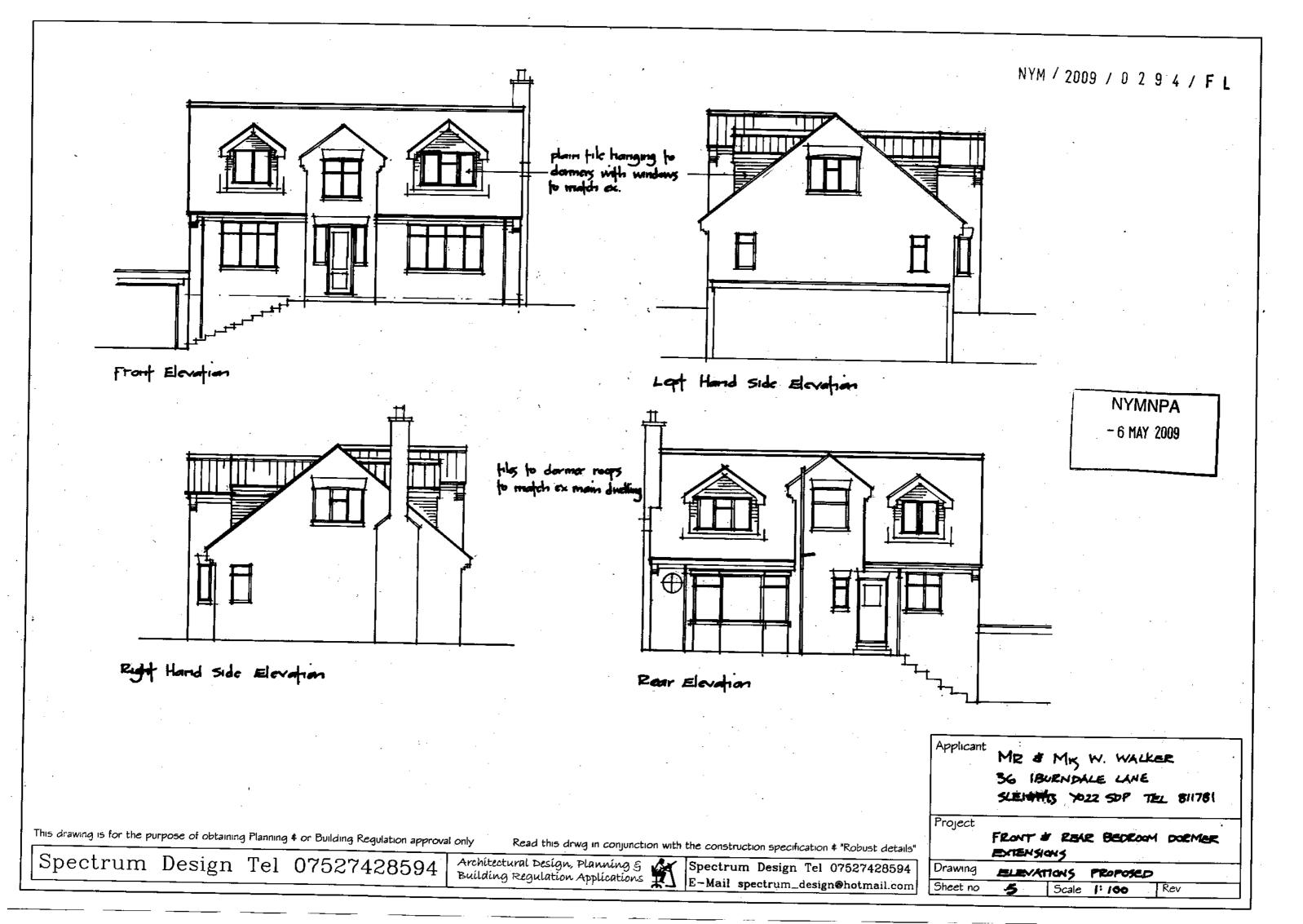
Spectrum Design Tel 07527428594

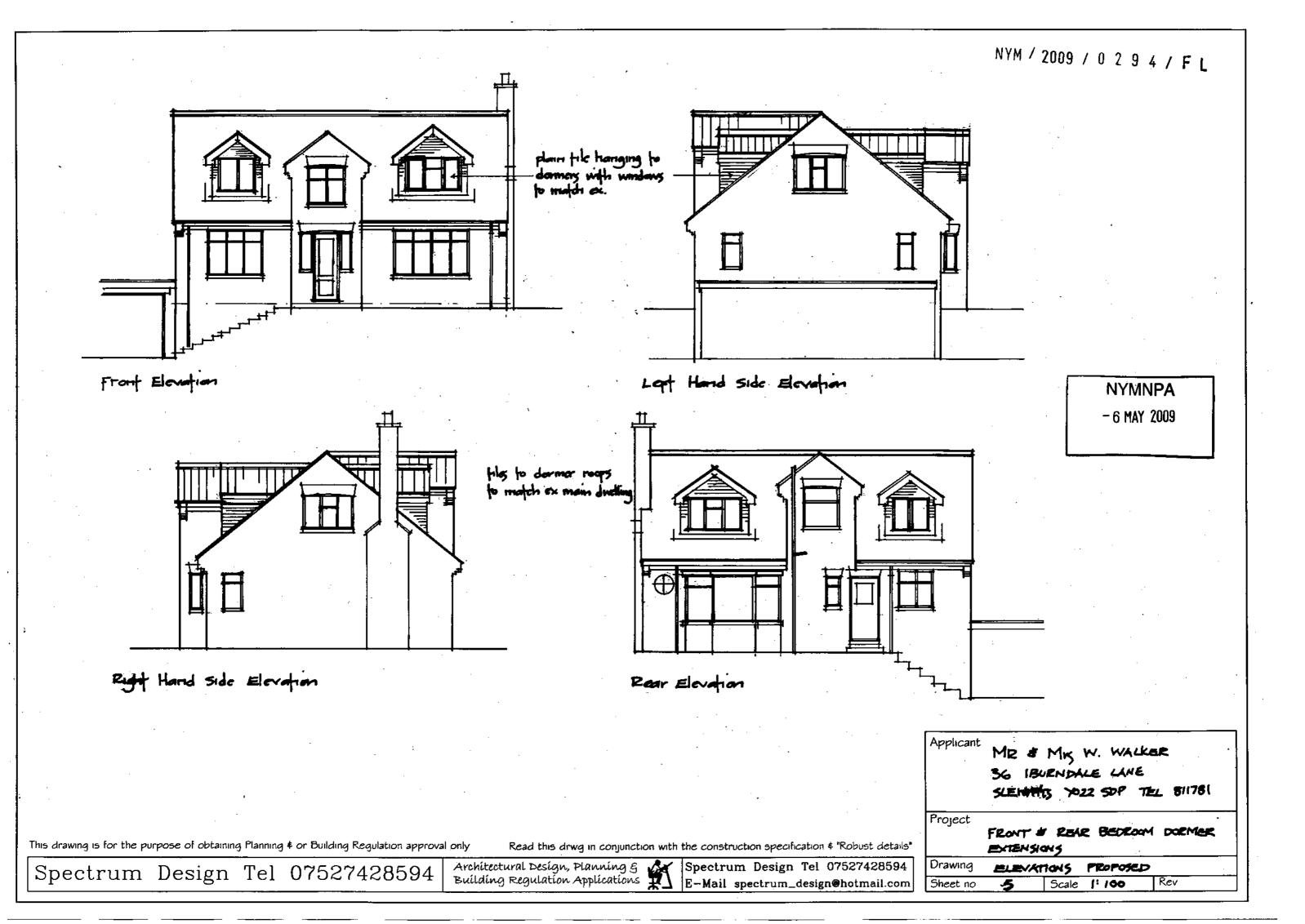


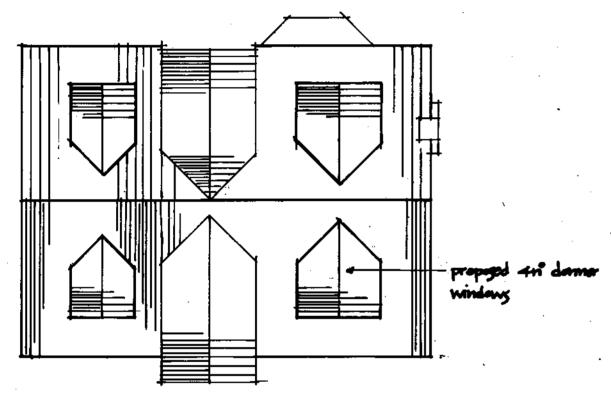
Architectural Design, Planning 5 Spectrum Design Tel 07527428594
Building Regulation Applications E-Mail spectrum\_design@hotmail.com E-Mail spectrum\_design@hotmail.com MR & Mry W. WALKER 36 IBURNDALE LANE SLEIGHTS YOUR SOP TEL 811781

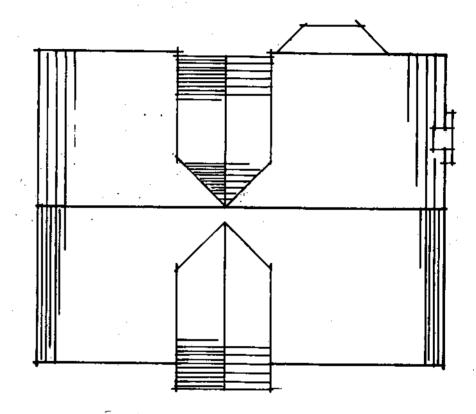
Project FRONT # REAR BEDROOM DOEMER BUENSIONS

Drawing PROPOSED F.F. PLAN Sheet no Scale 1:50









NYMNPA -6 MAY 2009

This drawing is for the purpose of obtaining Planning # or Building Regulation approval only

Read this drwg in conjunction with the construction specification # "Robust details"

Spectrum Design Tel 07527428594



Architectural Design, Planning & Spectrum Design Tel 07527428594
Building Regulation Applications E-Mail spectrum\_design@hotmail.com E-Mail spectrum\_design@hotmail.com

MR & MIS W. WALKER Project Drawing Sheet no Scale |: 100