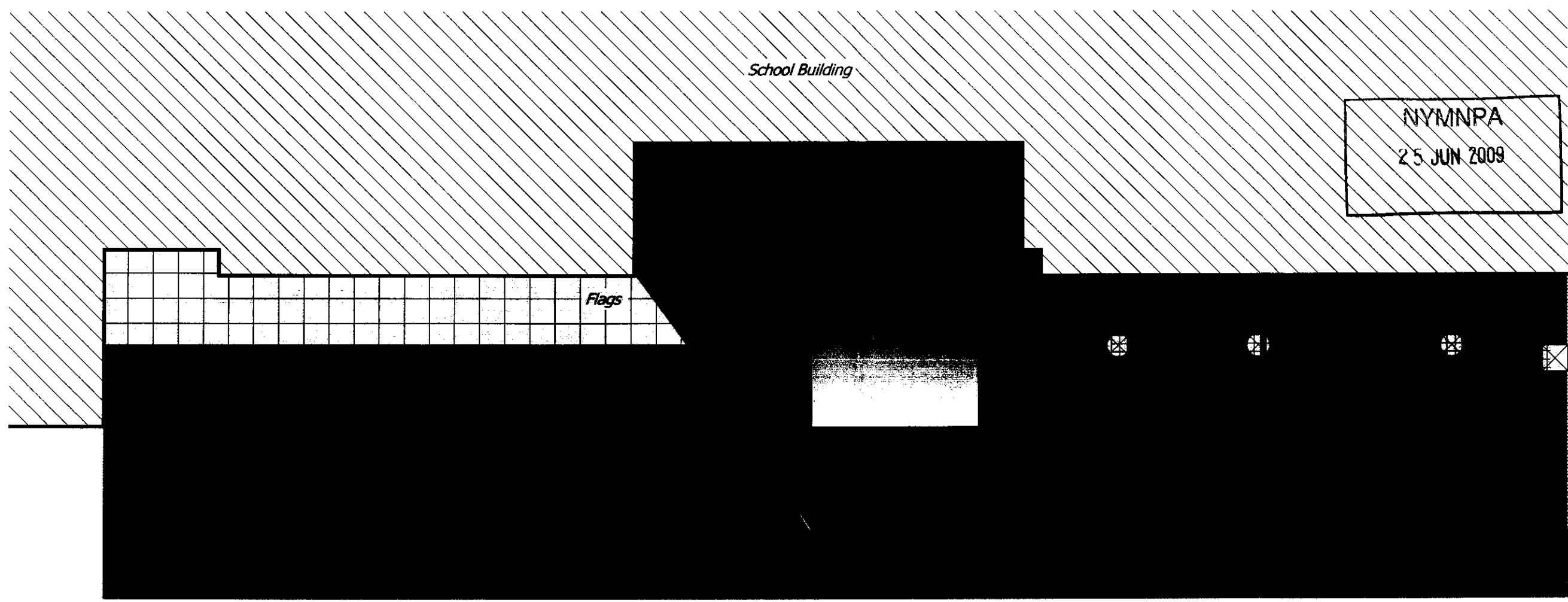


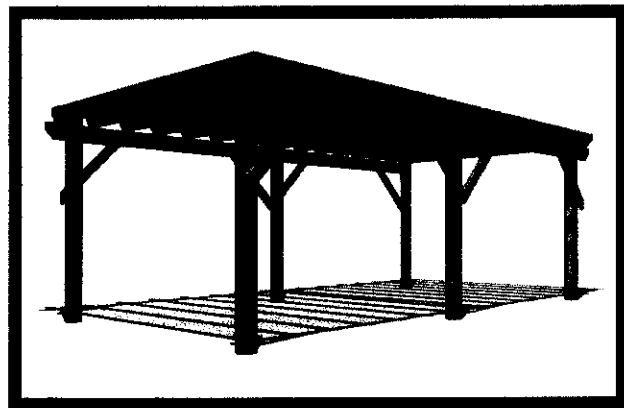
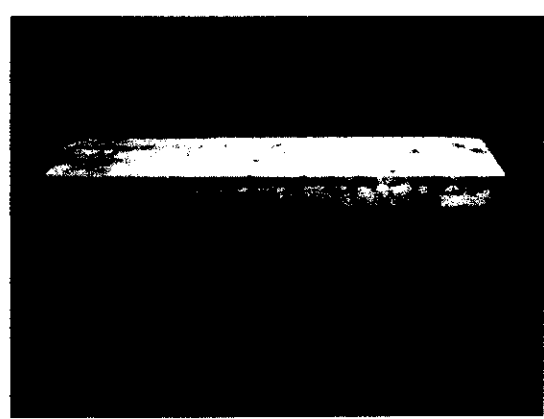
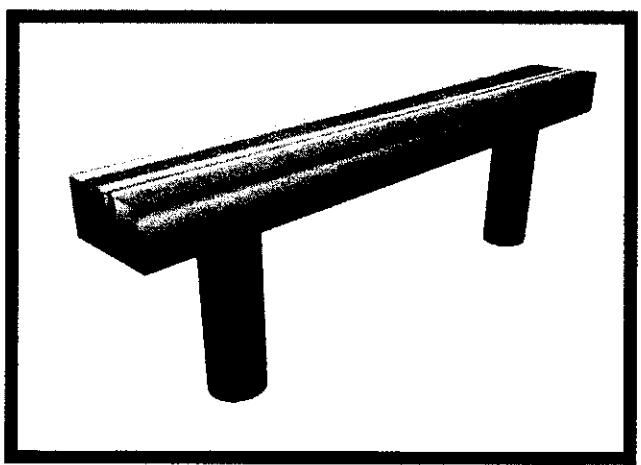


Hawsker cum Stainsacre CE School

Proposed Layout



ROSPA Member



Ref: 30036

Scale: 1:50 @ A3

Designer: Richard Pearcey

Area Manager: Emma Sherburn

Date: 14-04-09



01702 291129



01702 290092

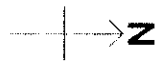
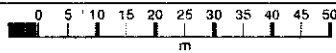
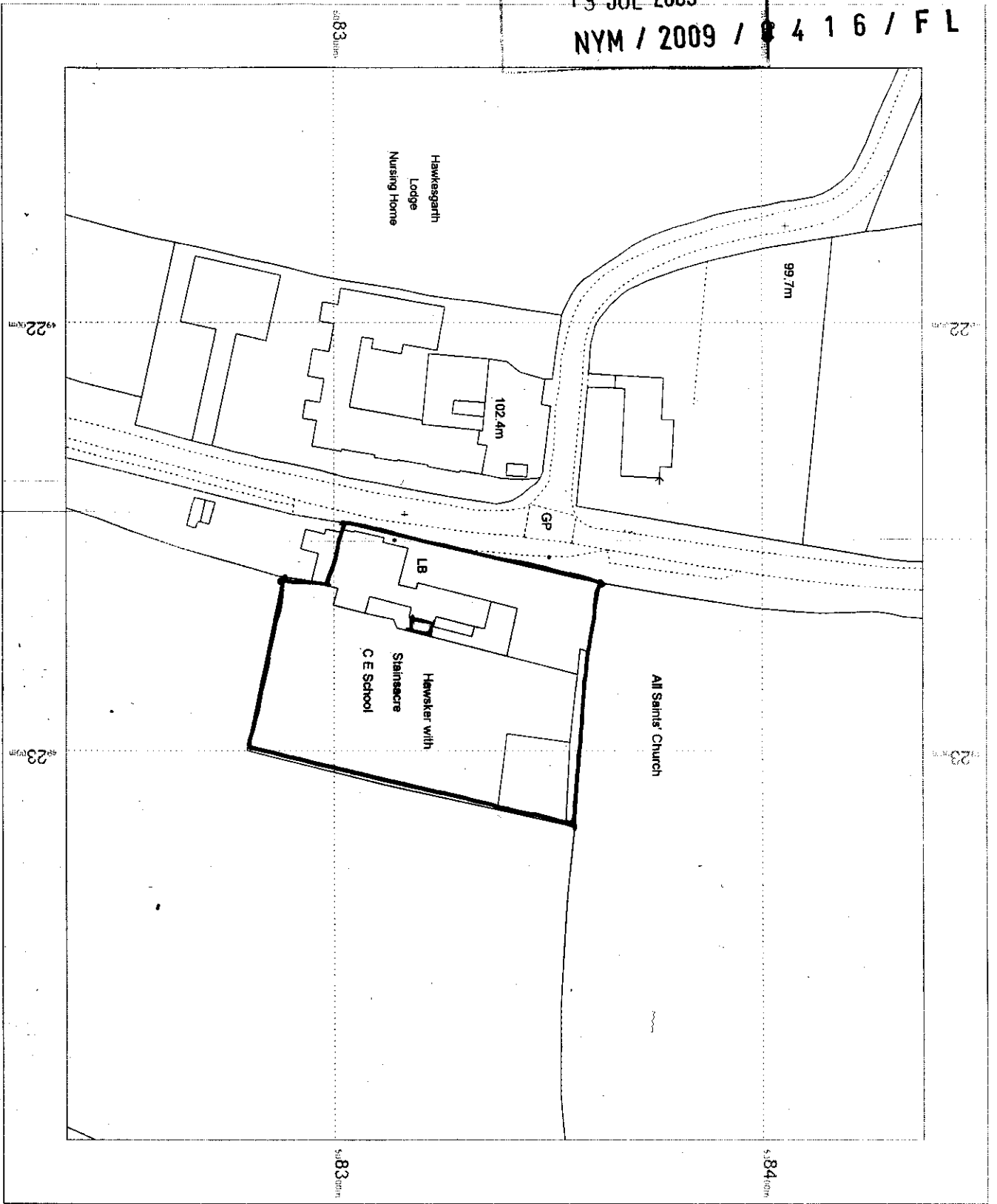


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NYMNP

13 JUL 2009

NYM / 2009 / 416 / FL

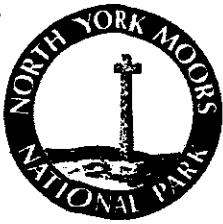


OS Mastermap
09 January 2009
www.centremapslive.com
1:1250 scale print at A4

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Map data
reproduced from
OS Ordnance
Survey

CENTREMAPSlive
www.centremapslive.co.uk



NZ92264, 08324

09/416
PT1

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:

NYMNPA
25 JUN 2009

3. Description of Proposed Works

Please describe the proposed works:

The school wishes to erect a set of benches for seating purposes with a pergola built over the top. This will be sited to the rear of the existing building overlooking the school field.

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: HAWSKER PRIMARY SCHOOL

Address 1: STATION ROAD

Address 2: HAWSKER

Address 3:

Town: WHITBY

County: N. YORKS

Postcode (optional): YO22 4LLA

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 / 2009 / 0.4 1 6 / FL

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:

HILARY SAUNDERS

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

Telephone conversation on June 11th regarding the need for planning permission

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 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:

NYMNPA

25 JUN 2009

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:

Parents of pupils at the school have been consulted.

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:

10. Materials

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

	Existing (where applicable)	NYM / 2009 / 0416 / FL Proposed	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		NYMNPA 25 JUN 2009	<input type="checkbox"/>	<input type="checkbox"/>	
Lighting			<input type="checkbox"/>	<input type="checkbox"/>	
Others (please specify)		Timber - pale brown stain	<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:

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			
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces			
Cycle spaces			
Other (e.g. Bus)			
Other (e.g. Bus)			

12. Foul Sewage

Please state how foul sewage is to be disposed of:

- | | |
|--|-----------------------------------|
| <input type="checkbox"/> Mains sewer | <input type="checkbox"/> Cess pit |
| <input type="checkbox"/> Septic tank | <input type="checkbox"/> Other |
| <input type="checkbox"/> Package treatment plant | <input type="checkbox"/> Unknown |

NYM

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):

NYMNPA

25 JUN 2009

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.)

2009 / 0416 / 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?

- | | |
|--|--|
| <input type="checkbox"/> Sustainable drainage system | <input checked="" type="checkbox"/> Existing watercourse |
| <input type="checkbox"/> Soakaway | <input type="checkbox"/> Pond/lake |
| <input type="checkbox"/> Main sewer | <input type="checkbox"/> 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:

- | |
|--|
| <input type="checkbox"/> Yes, on the development site |
| <input type="checkbox"/> Yes, on land adjacent to or near the proposed development |
| <input checked="" type="checkbox"/> No |

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

- | |
|--|
| <input type="checkbox"/> Yes, on the development site |
| <input type="checkbox"/> Yes, on land adjacent to or near the proposed development |
| <input checked="" type="checkbox"/> No |

c) Features of geological conservation importance:

- | |
|--|
| <input type="checkbox"/> Yes, on the development site |
| <input type="checkbox"/> Yes, on land adjacent to or near the proposed development |
| <input checked="" type="checkbox"/> No |

15. Existing Use

Please describe the current use of the site:

Playground area adjacent to the school

Is the site currently vacant? Yes No

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

see above

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

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
 NYM / 2009 / 0 4 1 6 / FL

Proposed Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							A

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							B

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							C

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							D

Existing Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							E

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							F

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							G

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						
Live-work units	<input type="checkbox"/>						
Cluster flats	<input type="checkbox"/>						
Sheltered housing	<input type="checkbox"/>						
Bedsit/studios	<input type="checkbox"/>						
Unknown type	<input type="checkbox"/>						
Totals (a+b+c+d+e+f+g)=							H

Total existing residential units
 (A+B+C+D)=

Total proposed residential units
 (E+F+G+H)=

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	Shops	<input type="checkbox"/>			
	Net tradable area:	<input type="checkbox"/>			
A2	Financial and professional services	<input type="checkbox"/>			
A3	Restaurants and cafes	<input type="checkbox"/>			
A4	Drinking establishments	<input type="checkbox"/>			
A5	Hot food takeaways	<input type="checkbox"/>			
B1 (a)	Office (other than A2)	<input type="checkbox"/>			
B1 (b)	Research and development	<input type="checkbox"/>			
B1 (c)	Light industrial	<input type="checkbox"/>			
B2	General industrial	<input type="checkbox"/>			
B8	Storage or distribution	<input type="checkbox"/>			
C1	Hotels and halls of residence	<input type="checkbox"/>			
C2	Residential institutions	<input type="checkbox"/>			
D1	Non-residential institutions	<input type="checkbox"/>			
D2	Assembly and leisure	<input type="checkbox"/>			
OTHER	Please specify	<input type="checkbox"/>			
		<input type="checkbox"/>			
Total					

NYMNP
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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				
Proposed employees				

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

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:

NYM / 2009 / 0 4 1 6 / F L

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"/>		

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Please provide the maximum annual operational throughput of the following waste streams:

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 (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.

NYM / 2009 / 0 4 1 6 / F L

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):

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

NYMNPA
25 JUN 2009

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

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:

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

The correct fee:

3 copies of a design and access statement:

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

I/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):

12.6.09

(date cannot be pre-application)

28. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

[Redacted] [Redacted] [Redacted]

Country code: Mobile number (optional):

[Redacted] [Redacted]

Country code: Fax number (optional):

[Redacted] [Redacted]

Email address (optional):

[Redacted]

29. Agent Contact Details

Telephone numbers

YM / 2009 / 0 4 1 6 / FL
Country code: National number: Extension number:

[Redacted] [Redacted] [Redacted]

Country code: Mobile number (optional):

[Redacted] [Redacted]

Country code: Fax number (optional):

[Redacted] [Redacted]

Email address (optional):

[Redacted]

30. 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:

JOHN BARBER

Telephone number:

[Redacted]

Email address:

[Redacted]

NYMNP
25 JUN 2009

Hawsker-cum-Stainsacre Primary School

Hawsker, Whitby, North Yorkshire, YO22 4LA

Tel: 01947 602772 Fax: 01947 601152

Email address: admin@hawsker-cum-stainsacre.n-yorks.sch.uk

Website: www.hawskerschool.co.uk

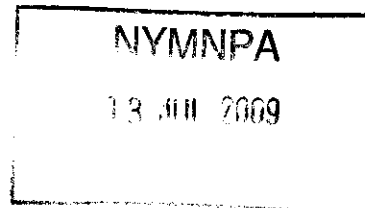
Headteacher: Mr J L Barber



NYM / 2009 / 0 4 1 6 / F L

10th July 2009

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



Dear Sirs

NYM Reference Number: NYM/2009/0416/NEW

The site selected for the erection of benches and pergola is adjacent to the school building and is currently a plain tarmaced area. The materials that will be used will be in the main timber. The timber itself will have been treated against rot but will retain its natural colouring. There are no plans for any painting or staining to take place. Because it is a natural material it should blend in nicely with the existing school building. Access will be from either the school field or from the school building itself and there is a graded incline which will allow access by wheelchair users should this be necessary. The scale of this project is clearly marked on the plans and the amount of development is minimal.

Yours sincerely



J L Barber



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 day 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.

NYM / 2009 / 0 4 1 6 / FL

Signed - Applicant: _____ Or signed - Agent: _____ Date (DD/MM/YYYY): _____

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
* NYCC	* County Hall Northallerton	* May '09

30 JUL 2009
MM

Signed - Applicant: _____ Or signed - Agent: _____ Date (DD/MM/YYYY): 14.07.09

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.

North York Moors National Park Authority



A member of the Association of National Park Authorities

The Old Vicarage, Bondgate, Helmsley, York YO62 5BP

Tel: 01439 770657 e-mail: general@nc.northyorkmoors-npa.gov.uk

Fax: 01439 770691 www.moors.uk.net

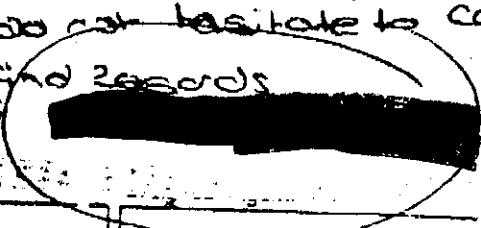
Andy Wilson
Chief Executive (National Park Officer)

FAO Mr Barber. Thank you for the information supplied received today. Unfortunately the certificates have not been filled in correctly.

I attach a copy of the certificates and have indicated with a * the areas you must fill in. If you have any further queries please do not hesitate to contact me.

With Compliments

Kind regards



ATTN OF!



25 - Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATED

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7
The applicant certifies that:
Certificate A cannot be issued for this application if:
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 the 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:

NYM / 2009 / 0 4 1 6 / F L

[Empty box for steps taken]

Notice of the application has been published in the following newspaper (circulation 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): 14-07-09

(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

Signed - Applicant: [] Or signed - Agent: [] Date (DD/MM/YYYY): []

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:
- 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 other plans and drawings or information necessary to describe the subject of the application:
- The correct fee:
- 3 copies of a design and access statement:
- 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): [] (date cannot be pre-application)