

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

2010/0926

Application for a non-material amendment following a grant of planning permission.

Town and Country Planning Act 1990

DRAFT

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

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	2. Agent Name and Address
Title: me+mes First name:	Title: First name:
Last name: CARBOTT	Last name:
Company (optional):	Company (optional): PETERRAYMENT DESIGN LTD
Unit: House House suffix:	Unit: House number: House suffix:
House name: MILLERS HILL	House STRAM HEAD
Aildress 1: PRIESTMANS LANE	Address 1: ALSLABY
Address 2: THORNTON LEDALE	Address 2:
Address 3:	Address 3:
Town: PCKERING	TOWN: RCKERING
County: N. YORKEHIRE	County: NORTH YORKSHIRE
Country:	Country:
Postcode: 4018 7RT	Postcode: 4018 8PE

NYMNP 1 2.2 May 20%

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3. Site Address Details Please provide the full postal address of the application site. Under House House suffix: House name: Address 1: PRIESTMANS LANE Address 3: Town: PCKERING County: Postcote (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting Northing: Description:	### A. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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: HUARA SALACES Reference: Date of advice (DD/MM/YYYY): Details of pre-application advice received:	
5. Eligibility Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates? If you have answered No to this question, you cannot apply to make a non-material amendment. If you are not the sole owner, has notification under article 4F(3) of the GDPO been given? Yes No Not Applicable If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered Yes to this question, please give details of persons notified; Person Notified Address Date of Notification		
6. Authority Employee / Member		
With respect to the Authority, I am: Do (a) a member of stelf	any of these statements apply to you? Yes No	
If yes please provide details of the name, relationship and role		
MRS GARBUTT - NYMNP ANTHORITY		

7. Description Of Your Proposal		
Please provide a description of the approved development as shown on the decision letter, including application reference number and the decision in the sections below. Please also provide the original application type:		
REPLACEMENT SINGLE STOREY CARACE AND CARDEN STORE AT MILLERS HILL, PRIESTMANS LANG, THORNTONLE		
Reference number: Date of decision (DD/MM/YYYY):		
NYM/2010/0267/FL 24/05/2010		
Whatwas the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')		
8. Non-Material Amendment(s) Sought		
Please describe the non-material amendment(s) you are seeking to make:		
INCREASE IN EAUES & RIDGE HELGHT, CHANGED DOOR SPECLFICATION + LINTEL DETAILS		
Are you intending to substitute amended plans or drawings? If Yes, please complete the following: Old plan/drawing number(s):		
2603101		
New plan/drawing number(s):		
260 310 1 C		
Please state why you wish to make this amendment:		
TO PROVIDE MORE CONVENIENT ACCESS TO THE PROPOSED		
NYMNDA 2.2.1(3) 200		

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the I Information required will result in your application not being accepted Loca Planning Authority has been submitted.	nformation in support of your proposal. Failure to submit all l. It will not be accepted until all information required by the	
The Original and 3 copies of a completed and dated application form:		
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application.		
The Correct fee:		
10. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Signed - Applicant: Date (DD/MM/YYYY): 18/11/2010		
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	
13. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? 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: Telephone number:		
Email address:		

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