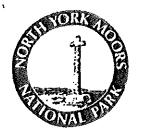
NZ 91447, 06173



North York Moors National Park Authority The Old Vicarage Bondgate Helmsley NYM / 2010 / 0 0 5 5 / N M York YO62 5BP

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

Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

2010155 PT1

NYMNPA 22 JAN 2010

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:	m R First name: D	Title:	MR First name	
Last name:	STUART	Last name:	HARRISON	
Company (optional):	·	Company (optional):	BHD PARTNECSH	
Unit:	House number: House suffix:	Unit:	House number:	
House name:	RIGG FARM CARAVAN PARK	House name:	AIRY HILL MA	
Address 1:	STAINSACRE	Address 1:	WATERSTEAD L	
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	NHITBY	Town:	WHITBY	
County:	N. Yocks	County:	N. YOCKS	
Country:		Country:		
Postcode:	4022 4LP	Postcode:	4021 1QB	

Title:	MR First name: TIM				
Last name:	HARRISON				
Company (optional):	BHD PARTNECSHIP				
Unit:	House number: House suffix:				
House name:	AIRY HILL MANDE				
Address 1:	WATERSTEAD LANE				
Address 2:					
Address 3:					
Town:	инітвч				
County:	N. YOLKS.				
Country:					
Postcode:	Y021 1QB				

	NYM / 2010 / n 0 5 5 / N M
3. Site Address Details	4. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House House suffix:	authority about this application? Yes No
name: RIGG FARM CARAVAN PARK	If Yes, please complete the following information about the advic- you were given. (This will help the authority to deal with this
Address 1: STAINSACRE	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name: WENDY TROUSDALE
Town: WHITEY	Reference:
Postcode	EMAIL - RIGGFARM CARAVANSITE NYM/2009/0687/FL
(optional): 4022 HLT Description of location or a grid reference.	Date of advice (DD/MM/YYYY): 18 · D1 · 10
(must be completed if postcode is not known):	Details of pre-application advice received: NEED TO APPLY FORMALLY FOR THE ALTERATION TO COND.
Easting: Northing: Description:	1 UNDER A " NUM MATERIAL MINDS AMENDMENT. APP.
	2 2 JAN 2010
f you are not the sole owner, has notification under article 4F(f you have answered No to this question, you ca f you have answered Yes to this question, please give details of	nnot apply to make a non-material amendment.
Person Notified	Address Date of Notification
. Authority Employee / Member	
Vith respect to the Authority, I am: a) a member of staff	Do any of these statements apply to you?
b) an elected member	Yes No
) related to a member of staff () related to an elected member	
f yes please provide details of the name, relationship and role	
f yes please provide details of the name, relationship and role	

7. Description Of Your Proposal Flease provide a description of the approved developm	nent as shown on the decision letter, including application reference number and
oate of decision in the sections below. Please also provi-	ide the original application type: THES EDWIN TO FORM ANNEXE DWELLING AT RIGG FARM,
Reference number:	Date of decision (DD/MM/YYYY):
NYM12000/0587/FL	27/10/2009
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')	Full
	NYMNPA 22 JAN 2010
Are you intending to substitute amended plans or drawing f Yes, please complete the following: Old plan/drawing number(s):	gs? Yes No
New plan/drawing number(s):	
ease state why you wish to make this amendment:	
PLEASE SEE ATTACHED METHOD STATEMEN	INT FROM MAB ENVIRUMENT & ECOLOGY LEG.

		NYM 7. 2010 / 0 /	155/NM	
9. Application Requirements - Checklist Please read the following checklist to make sure you have information required will result in your application not bel Local Planning Authority has been submitted.	sent all the	information in support of your proposal. F ed. It will not be accepted until all informati	allure to submit all on required by the	
The original and 3 copies of a completed and dated application for		NYM	NPA	
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:		1 22 JAN	22 JAN 2010	
The correct fee:		Paga Anton of Production (AST PROTOCOS AND AST AND AST	The control of the ATT FOR COSTS AND A CONTROL OF THE COSTS AND A CONTROL OF THE COSTS AND A COSTS AND	
	cribed in th d - Agent: 21 NEQSHIP	Is form and the accompanying plans/drawin Date (DD/MM	I/YYYY):	
	tension imber:	12. Agent Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Extension number:	
3. Site Visit an the site be seen from a public road, public footpath, brid the planning authority needs to make an appointment to o ut a site visit, whom should they contact? (Please select only Other has been selected, please provide: ontact name:	carry rone)	Agent Applicant Ot	her (if different from the ent/applicant's details)	