## SE GOODY 42010 / 0 1 0 1 ) F 1 96007



2010/101 PT1 North York Moors National Park Autherity The Old Vicarage Bendgate Helmsley York YOG2 5BP

Telephone; 01439 770657 Email: do@northyorkmoors-opa.gov.uk Webaite: www.moors.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.

Title:

Last name:

2. Agent Name and Address

First name:

MIL

Please complete using block capitals and black ink.

First name:

BINGHAM

1. Applicant Name and Address

Title:

Last name:

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Company	Company MANY CLANA Suc
(optional):	(optional): MAKKITAM - inc
Unit: House number: 5/5 House suffix:	Unit: House House suffix:
House BELVOIR TERRACE	House FAIRFLELD COTTAGE
Address 1: SCAMBOROUGH	Address 1: TUNOYEWBY HTHE
Address 2: WORTH YONKSHME	Address 2: 7 HRUY CWBY LYMB
Address 3:	Address 3: SCANBOROUGH
Town: NYMNDA	Town:
County:	County:
Country:	Country: WMT4 YMUSIFIKE
Postcode: TO 4 ZPP	Postcode: YO12 SRE
3. Description of Proposed Works	
Please describe the proposed works:	
* Extension to Front	+ REAR OF
PROPERTY PLUS WEW	ROOF + ROOMS WITHIN IT
* RECOGNION OF DOUBLE	GMCHAR (NEW ATTACHED)
	The state of the s

3. Description of Proposed Works (continued)	
Has the work already been started without planning permission?	
If Yes, please state when the works were started (DD/MM/YYYY):	Yes No
	(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 III House suffix:	proposed to or from the public highway? Yes No
House HACKNESS ROAD	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
Address 1: SCALBY	Do the proposals require any diversions,
	extinguishments and/or creation of public rights of way? Yes No
Address 2: WORTH YORK) HTE	If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/
Address 3:	drawing(s):
Town:	
County:	
Postcode	
(optional):	
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 possible:  Officer name:  MLS HLAMY SQUWDELS  Reference:  NYW/GWQ/ZOOG/5Z93  Date (DD MM YYYY):  (must be pre-application submission)  Advice given:  GEWAAL DLXUSSICW F  PLUPONLS MAX- TO AGREE  ACCOUNTS	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 plans or drawings:  NYMNPA  - 8 FEB 2010  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 any plans or drawings:
Will the proposed works affect	9. Council Employee / Member  Is the applicant or agent related to any member of staff or elected member of the Council?  If Yes, please provide details:

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10. Materials			······································		, ,
if applicable, please	state what materials are to be used exter	rnally. Include type, colour and name for e	ach ma	terial;	-
	Existing (where applicable)	Proposed	Not	. 1	
Walls	BRICK /STOWE TIMBOR CLASORING	BRICHWORK TO MATCH EXISTING.			
Roof	CONCRUTE TICES	TO WATCH EXYTING			
Windows	ROTTON THACK	WHITC UPIC			
Doors	4 11	11 " 4			
ioundary treatments a.g. fences, walls)			Ø		
ehicle access and ard-standing	Double Garage	Dorble gaage relocated			
ghting		NYMNPA -8 FEB 2010	R		
hers ease specify)					
you supplying additions, please state referen	onal information on submitted plan(s)/d nces for the plan(s)/drawing(s)/design ar	rawing(s)/design and access statement?  Ind access statement;	1	Ye	No 🗌 No
	1-4, DIA Statent		<del>- , , , , , , , , , , , , , , , , , , ,</del>	A delice superior	

14. Applicant Contact Detail	s	15. Agent Contact Del	ails
Telephone numbers		Telephone numbers	
Country code: National number:  Country code: Mobile number (optional):		Country code: National nu Country code: Mobile nur	
16. Site Visit			
Can the site be seen from a public ro	ad, public footpath, bridleway or	other public land? Yes	Пио
If the planning authority needs to me out a site visit, whom should they cou If Other has been selected, please pro	ntact? (Please select only one)	Agent Applie	ant Other (if different from the agent/applicant's details)
Contact name:		Telephone number:	
Email address:			
12. Planning Application Rec Please read the following checklist to information required will result in you the Local Planning Authority has been	make sure you have sent all the i	IID. IT WILL DOT DO CONCIDERED VI	did until all information reculred by
The completed and dated application form A plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of north Other plans and drawings or information necessary to describe the subject of the application	The completed, dated 7 Certificate (Agricultum Ownership Certificate (A, B, C or D - as applicate (A, B, C or D - a) applicate (A, B	A d star wo roll Holdings)  Article wo follows:  No Signature of the control of t	the following documents: esign and access rement where proposed rks fall within one of the pwing designated areas: atlonal Park te of special scientific interest proservation area ea of outstanding natural beauty orld Heritage Site le Broads



## VALIDATION CHECKLIST

HOUSEHOLDER APPLICATIONS for extensions, detached outbuildings and other alterations to existing dwellings

STANDARD REQUIREMENTS:



Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.

(1 original and 3 copies to be supplied unless the application is submitted	electronically)	
Completed application form	YES	N/A 🗌
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	N/A 🗌
Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995	YES	N/A 🗌
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	N/A 🗌
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 AYMNPA 1	
Proposed site layout plans at a scale of 1:500, 1:200 or 1:100	YES	N/A 🗌
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.	YESZ	N/A 🗌
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	N/A 🗌
Roof Plans to a scale of 1:50 or 1:100 If proposed development alters the existing roof	YES□	N/A 🖊
Existing and proposed site sections and finished floor level and site levels to a scale of 1:50 or 1:100	YES[]	N/A 🛮
Design and Access Statement	YESZ	N/A
Manufacturers specification/leaflet, for proposals incorporating plant/machinery (swimming pools/wind turbines)	YES.	N/A[]
Application fee Please consult our enclosed Schedule of Fees Cheques are to be made payable to NYMNPA	YES	· NO[]

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ADDITIONAL REQUIREMENTS (where likely to be relevant to the d	evelopment pro	posed)
Biodiversity Survey and Report	YES[]	N/A/Z
Flood Risk Assessments/ Sequential Test (flood zones)	YES□	N/A[]
Tree Survey/Arboriculture Assessment Where ground based works within 2 metres of the crown spreads of any trees covered by Tree Preservation Order or tree located in	YES	N/AJZ

NYMNPA

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