

WYM / 2010 / G 3 1.3 / L B

2. Agent Name and Address

MR

R. AGAR

House

number:

First name:

AGAR

House

ASSC.

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

2010/03/3

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

RICHARD

LTD

House

suffix:

FALM

Application for listed building consent for alterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas 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:

Unit:

House

name:

Address 1:

Last name:

Company

(optional):

Please complete using block capitals and black ink.

House

number:

First name:

LITTLE

AGENT

ANDRUW

House

suffix:

1. Applicant Name and Address

1/0

MR

Title:

Last name:

Company

(optional):

Address 1:

Unit:

House

name:

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

Address 1:	Address 1: 8 MAIN ILGAD
Address 2:	Address 2: A 15 C 14 B 7
Address 3:	Address 3:
Town:	Town: WHITBY
County:	County: NORTH YGRUSHIRG
Country:	Country:
Postcode:	Postcode: YOZI ISW
3. Description of Proposed Works	
Please describe the proposals to alter, extend or demolish the	
CONVERSION OF	EXISTING BUILDIONL
INTO PRIVATE	RESIDENCE GIAMETERS.
	M. 1811 50110
	5.0
•	
	. \
	< Date: 2007/05/11 09-57-51 € CRavition: 1 16 €

3. Description of Proposed Works (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
Has the work already started without consent?	Unit: House House suffix:
	House Noon LIEGH 14 ouse.
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1: 21 MAIN LOAD
	Address 2: AISLABY
· ·	Address 3:
(date must be pre-application submission)	Town: WHITBY
Has the work been	County: NORTH YORKSHIRE
completed without consent? Yes No	Postcode (optional): 1521 15w
	Description of location or a grid reference. (must be completed if postcode is not known):
If Yes, please state the date when the work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
(date must be pre-application submission)	
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site? Yes	Has assistance or prior advice been sought from the local authority about this application? Yes No
If Yes please describe and include the planning application reference number(s), if known:	If Yes, please complete the following information about the advice
Description Reference number	you were given. (This will help the authority to deal with this application more efficiently).
. number	Please tick if the full contact details are not known, and then complete as much as possible:
	Officer name:
	Reference:
	D (DD (MM 0000)
	Date (DD/MM/YYYY): (must be pre-application submission)
	Details of pre-application advice vectored?
	Details of pre-application-advices received?
	50 M.
	The state of the s
7. Neighbour and Community Consultation	8. Council Employee / Member
Have you consulted your neighbours or the local community about the proposal? Yes You	Is the applicant or agent related to any member of staff or elected member of the council?
If Yes please provide details:	
ii 163 picase provide details	If Yes, please provide details:
in res picase provide decans.	If Yes, please provide details:
n res picase provide decans.	If Yes, please provide details:

	Existing (where applicable)	Proposed	Not applicable	Dor Kno
External walls				
Roof covering				
Chimney				
Windows				
External doors				
Ceilings ,		EXISTING		
internal walls	·			
- Floors	· -			
nternal doors				
ainwater goods	·			
oundary treatments e.g. fences, walls)		INPA		
ehicle access and ard standing		MYMANPA 2010		
ghting	-	And the state of t		
hers dd description)				
you supplying additio es, please state plan(s)/	onal information on submitted drawings or /drawing(s) references: R. A ー A A A A S S C し し フ			 -

10. Demolition			11. Listed Building Alterations	. (2)
Does the proposal include the particular total demolition of a listed building		☑ No	Do the proposed works include alterations	No.
If Yes, which of the following doe	es the proposal involve?		If Yes, do the proposed works include:	-
a) Total demolition of the listed b	ouilding: Yes	☐ No	(you must answer each of the questions)	
b) Demolition of a building withi the curtilage of the listed buildin		∏No	a) Works to the interior of the building?	lo
c) Demolition of a part of the liste	ed building: Yes	No	b) Works to the exterior of the building?	lo
If the answer to c) is Yes:			c) Works to any structure or object fixed	
i) What is the total volume of the listed building?(cubic metres)			to the property (or buildings within its curtilage internally or externally? Yes N	o
ii) What is the volume of the part to be demolished?(cubic metres)			d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes N	0
iii) What was the (approximate) of erection of the part to be removed (date must be pre-application surplease provide a brief description building you are proposing to de	ed? (MM/YYYY) bmission) on of the building or p	art of the	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s)) .
The state of the s			AS INDICATOR ON RAYALASSC	٦
			DR4 Nos	
			2.311-01 ho 08 indune	
Why is it necessary to demolish or of the building(s) and or structure	extend (as applicable)	all or part		
or the sandingts, and or structure	(3):			
•				
	·			
12. Listed Building Grading			13. Immunity From Listing	
Please state the grading (if known) Buildings of Special Architectural o	of the building in the list r Historic interest? (Note	st of e: only	Has a Certificate of Immunity from Listing been sought in respect this building?	of
one box must be ticked)			Yes No Don't know	
Grade I	Ecclesiastical Grade		If Yes, please provide the result of the application:	
Grade II	Ecclesiastical Grade	*		
Grade II*	Don't kno	w 🗗 📗	NYMNPA 2010	
Ecclesiastical Grade I			10 m	
-			The state of the s	

14. Certificates (continued)		PARTICIPATION OF T		: {{\bar{a}}
Certificate under Regulation 6 of the Planning (List I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out t	ted Buildings and	addresses of everyone els) Regulations 1990 se who, on the day 21 days before the	date of
this application, was the owner (owner is a person the land to which this application relates, but I ha	with a freehold ve/ the applica	interest or leasehold intere nt has been unable to do	est with at least 7 years left to run) of an so.	y part of
The steps taken were:				·
		A		
Notice of the application has been published in the for (circulating in the area where the land is situated):	ollowing newsp		following date (which must not be ea days before the date of the applicati	
Signed - Applicant:	Or signed	- Agent:	Date DD/MM/	YYYY):
15. Planning Application Requirements - Or Please read the following checklist to make sure you have information required will result in your application being the Local Planning Authority has been submitted. 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:	ave sent all the	3 copies of of othe necessary to descri	r plans and drawings or information requir be the subject of the application:	ed by
		-		
16. Declaration				
I/we hereby apply for planning permission/consent as information.		als form and the accompa	nying plans/drawings and additional Date (DD/MM/YYYY): (date car	not be
I/we hereby apply for planning permission/consent as information.	described in th	·	Date (DD/MM/YYYY): 14 / 04 /いい (date car pre-appl	not be
l/we hereby apply for planning permission/consent as information. Signed - Applicant: Or si	described in th	Λ	Date (DD/MM/YYYY): 14 / 04 / いい (date car pre-appl	nnot be ication)
l/we hereby apply for planning permission/consent as information. Signed - Applicant: Or si 17. Applicant Contact Details	described in th	18. Agent Contac	Date (DD/MM/YYYY): 14 / 04 / いい (date car pre-apple) Details Ext	not be
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I/we hereby apply for planning permission/consent as information. Signed - Applicant: Or signed - Applicant: Or signed - Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please selected) (Please selected	described in the gned - Agent: Extension number: h, bridleway or at to carry	Telephone numbers Country code: Nation Country code: Mobil Country code: Fax in Email address (options other public land?	Date (DD/MM/YYYY): 14 / 04 / 2010 (date car pre-apple) t Details Ext nur le number (optional): 10	ension mber:
I/we hereby apply for planning permission/consent as information. Signed - Applicant: Or si 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpatl of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please selections)	described in the gned - Agent: Extension number: h, bridleway or at to carry	18. Agent Contact Telephone numbers Country code: Nation Country code: Mobil Country code: Fax in Email address (options)	Date (DD/MM/YYYY): 14/04/2010 (date car pre-apple) Ext nur le number (optional): umber (optional): Yes No Applicant Other (if different fr	ension mber: