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10/356 PTI North York Moors National Park Authority The Old Vicarage Bondgate Heimsley York YOSZ 58P

Telephone: 01439 770657 Email: do@rorthyorkmoors-ripa.gov.uk Website: www.moors.uk.net

VICTORIA

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.

2. Agent Name and Address

MUSS First name:

Please complete using block capitals and black ink.

First name:

1. Applicant Name and Address

Title:

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

Last name:	CHADWICK	Last name:	WHARTON
Company (optional):		(optional):	A CONTECTURAL DESIGN
Unit:	House number: House suffix:	Unit	House House suffix:
House name:	RANWORTH	House marrie:	
Address 1:	anneal ropo	Address T:	RED SCAR LANE,
Address 2:	RAVENSCIAR	Address 2:	NEWBY
Address 3:		Address 3:	
Town:		Towns	SCHEBOROUGH
County:		Coverty:	
Country:		Cosmiry:	
Postcode:		Postcode:	4012 STRH
3. Descri	ption of Proposed Works		
Please desc	ribe the proposed works:	blantinann terlandrak (h. 1844) (h. 1848) (h. 1848) (h. 1848)	Angua genératnya.
PROP	osed porch exte	NSCON	UD REAK.
		2	NYMNPA
			0.7 MAY 2010
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		2	
	944	ALCONO.	\$Date: 2007/05/11 00 \$3.50 \$ \$Recipion: 1.45 \$

3. Description of Proposed Works (continued)	
Has the work already been started without planning permission?	Ves No
If Yes, please state when the works were started (DD/MM/YYYY):	2009 (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/YYY%):	(date must be pre-application submission)
4. Site Address Details	S. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or aftered whicle access
Unit: House House suffix:	proposed to or from the public highway? Yes 486
House RANWORTH	proposed to or from the public highway? Yes No
Address 1: CHURCH RD	Do the proposals require any diversions, extinguishments and for creation of public
	rights of way? Yes No If Yes to any questions, please show details on your plans or
Address 2: ZEVENSCIA L. Address 3:	chavings and state the reference number(s) of the plan(s)/
Town:	-
County:	And the second s
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 advize 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: Officer name: Date (DD MM YYYY): Imust be pre-application submission) Advice given: GENER MUY POSITIVE (SPOKE TO PAPLICANT)	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: 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 rumbers e.g. T1, T2 etc. and state the reference number of any plans or drawings:
8. Parking Will the proposed works affect existing car parking arrangements? Yes If Yes, please describe:	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:

	Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
Walls	STONE	STONE & & TIMBER			
Roof	SLATE	POLYCHEBONATE			
Windows	TIMBER	TIMBERY CHASS BLOCKS	Consum		
Doors	TWIBER	BY Q RECYCLED MATERIALS DOOR			
Boundary treatments (e.g. fences, walls)			Apparature and the second seco	Company of the Compan	
Vehicle access and hard-standing		NYMNPA 0 7 MAY 2010	1		
Lighting					
Others (please specify)	The second secon	۸,			
f Yes, please state refe	ditional information on submitted plants erences for the plants)/drawing(s)/desig	sily drawing (s)/design and access statement to and access statement: DESIGN 6—19	?	Z	Yes No

11. Certificates (continued)		
Town and Country Pla	CERTIFICATE OF OWNERSHIP - CERTIFIC nning (General Development Procedure) Ords	ATE D er 1995 Certificate under Article
certify/ The applicant certifies that:	_	
Certificate A cannot be issued for All reasonable steps have been	taken to find out the names and addresses of eve	eryone else who, on the day 21 days before the
date of this application, was the owner i	fowner is a person with a freehold interest or leaseh or relates, but I have/ the applicant has been unab	old interest with at least 7 years left to run) of any
The steps taken were:	Treates, our mayor the application	
	MATTER STATE OF THE STATE OF TH	
Notice of the application has been pub (circulating in the area where the land i		In the following date (which must not be earlier raw 21 days before the date of the application):
the first the first where the same		
		Date (DD/MM/YYY)
Signed - Applicant:	Or signed - Agent	Date (DD/WWW.11)
	AGRICULTURAE HOLDINGS CERTIFICA	enterview of the property of the control of the con
Town and Country Plan Agricultural Land Declaration - You Mus	nning (General Development Procedure)Order	r 1995 Certificate under Article 7
(A) None of the land to which the a	pplication relates is, or is: इन्नार छर्ड, का बदुर्गरपर्धि प्रकार के	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYY)
	A STATE OF THE STA	. 30/04/0
R) I have/ The applicant has given	the requisite notice to every person other than n	www.if/ the applicant who, on the day21 days
before the date of this application, was	s a tenant of an agricultural holding on all or part	of the land to which this application relates,
as listed below: Name of Tenant	Acidress	Date Notice Served
Name of Tenant	- Aguico	
		en and the state of the state o
		MARKET
		TIMNPA
		0 9 mg.
		NYMINPA 7
Landing to the second s		
Signed - Applicant:	Or sägned - Agent:	Date (DD/MM/YYY
	1	
- Annual Control of Co	j ì	[
12. Planning Application Requ		
Please read the following checklist to n	nake sure you have sent all the information in sup application being deemed invalid. It will not be	peart of your proposal. Failure to submit all
the Local Planning Authority has been	submitted.	ensuration tour ournainmoustation tedanco of
3 copies of a completed	3 copies of a design and access statement where proposed	The correct fee: [
and dated application form: 3 copies of a plan which identifies	works fall withing one of the	. 3 copies of the completed, dated Article
the land to which the application	following designated areas:	7 Certificate (Agricultural Holdings): {
relates drawn to an identified scale and showing the direction of North:	National Park Site of special acientific interest	3 copies of the completed, dated Ownership Certificate
3 copies of other plans and drawings	Conservation area Area of outstanding natural brassy	(A, B, C or D - as applicable):
or information necessary to describe the subject of the application:	 World Heritage 5ste 	
	The Broads	
13. Declaration		
I/we hereby apply for planning permis information.	sion/consent as described in this form and the ac	companying plans/drawings and additional
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		30/04/10 (date canno
i	1	inc.abhirtir

14. Applicant Contact Details		15. Agent Col	ntact Details		
Telephone numbers	The state of the s	Telephone numb	XEP'S		
Country code: National number: Country code: Mobile number (op:	Extension number:	The state of the s	National number		
Country code: Fax number (option Email address (optional):	a i):	Country code:	Fax number (opt ntoral);	ional):	
16. Site Visit Can the site be seen from a public roa		rether public land?	Yes	UNO	
If the planning authority needs to mail out a site visit, whom should they con	te an appointment to carry tact7 (Please select only one)	Agent	Applicant	Other (if different from agent/applicant's detail	the
If Other has been selected, please pro Contact name: Email address:	vide:	Telephone numbe	37		e blanisa.
Please read the following checklist to information required will result in you the Local Planning Authority has been 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	make sure you have sent all the	glid, it will not be co The original and ad Article Itural Holdings) ad	Acopies of the f A design stateme works fa followin Nation Site of Consei Area o	ntil all information required to ollowing documents: a and access at where proposed ill within one of the g designated areas: aal Park special scientific interest routstanding natural beauty Heritage Site	
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