

SE 301087, 495259

NYM / 2010 / 0 3 8 5 / F L

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



Application for removal or variation of a condition following grant of planning permission.

Town and Country Planning Act 1990.

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.

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. Applic	ant Name and Address	2. Agent Name and Address			
Title:	MR First name: DAVID	Title: First name:			
Last name:	MARSDEN	Last name:			
Company (optional):		Company (optional):			
Unit:	House number: House suffix:	Unit: House House suffix:			
House name:	THE GATEHOUSE	House name:			
Address 1:	NEWLANDS ROAD	Address 1:			
Address 2:	CLOUGHTON	Address 2:			
Address 3:	,	Address 3:			
Town;	Scarbolough	Town:			
County:	NORTH YORKSHIRE	County:			
Country:	ENGLANS	Country:			
Postcode:	YO 13 OAR	Postcode: NYMNPA			
		13 MAY 2010			

Please provide the full postal address of the application site. Unit:	3. Site Address Details	4. Pre-application Advice						
Unit: number: suffix:		Harten Lander Brown St.						
Now were given. (This will help the authority to deal with this application more efficiently). NEW LANDS ROAD Address 1: NEW LANDS ROAD Address 3: CLOUGHTON Address 3: Town: SCARROLOUGH County: NORTH YORGHIRE Postcode (optional): NORTH YORGHIRE Description of location or a gird reference. (must be completed if postcode is not known): Easting: Northing: Description: Description of location or a gird reference. (must be pre-application advice received? REFERCES TO ADJUCE IN AUTHORY'S DEScription Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF ENISTING ARRICE WITH 2 STOREY EXTENSION INC. INTEGRAL ANDEST OUTSHEET EXTENSION INVOLVING CONSTRUCTION OF A CONSERJATORY STYLE CLASED ROOM Reference number: NYMMONISTOR Date of decision (DD/MMYYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSERJATORY STYLE CLASED ROOM Reference number: NYMMONISTOR Date of decision (DD/MMYYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSERJATORY STYLE CLASED ROOM Reference number: NYMMONISTOR DATE Date of decision (DD/MMYYYY): 25 09 2000 (date must be pre-application submission) Has the development already started? If Yes please state when the development started (DD/MMYYYY): 2000(?) (date must be pre-application submission)	onit: number: suffix:	NVM / 2010 / 0 3 8 5 / F L						
Please titck The full contact details are not known, and then complete as much as possible:	name: THE GATEHOUSE							
Address 3: Town: Scalbolowal Science County: North Yolvanile Description of location or a grid efference. (must be completed if postcode is not known): Easting: Northing: Description of location or a grid efference. (must be completed if postcode is not known): Easting: Northing: Description: Details of pre-application submission) Details of pre-application advice received? Alfred East To Abute In Authority's Description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF BETSTING CARRAGE WITH 2 STOREY EXTENSION INC. INTEGLEN CARRAGE NOTESTING CARRAGE WITH 2 STOREY EXTENSION INC. INTEGLEN CARRAGE NOTESTING CARRAGE WITH 2 STOREY EXTENSION INC. INTEGLEN CARRAGE STATE OF CONSERVATORY STYLE CLASED ROOM Reference number: Name of opinion of the application relates: 1. CONSTITUTED NUMBER (# 6. 1.3 NAY 2011) 4. 9. 13 NAY 2011 If Yes please state when the development started (DD/MM/YYYY): 2600(?) (date must be pre-application submission) If Yes please state when the development started (DD/MM/YYYY): 2600(?) (date must be pre-application submission)	Address 1: NEWLANDS ROAD							
Town: Scarrollow HELEA WESTER Reference: Notition Notition Notition Notition Northing: Description of location or a grid reference. Northing: Description: Northing: Northi	Address 2: CLOUGHTON	known, and then complete as much as possible:						
Reference: North Yourships	Address 3:							
Postcode (optional): Yo 13 O AR OBE (DMM/YYYY): Date (DMM/YYYY): Must be completed if postcode is not known): Easting: Northing: Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description: Description: Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF EXISTING CARAGE WITH 2 STOLEY EXTENSION INC. INTEGLAL CARAGE WORLD STRUCTION OF A CONSECUATORY STYLE CLASED ROOM Reference number: NYMM OXFOSTS PA Date of decision (DD/MM/YYYY): ZO Q ZOCO (date must be pre-application relates: 1. CONSTITUTED NUMBER 4 6. 2. 7. NYMAPA 4. 9. 13 MAY 2010 Has the development already started? PYes Inc. If Yes please state when the development started (DD/MM/YYYY): ZOCO? (date must be pre-application submission) Has the development been completed? Inc. If yes please state when the development started (DD/MM/YYYY): DOCO? (date must be pre-application submission)	Town: SCARBOROUGH							
Postcode (optional): Yo 13 O AC (optional): Your proposal (must be pre-application advice received? Easting: Northing: Description of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF EXISTING CARRGE WITH 2 STOCKY EXTENSION INC.INTEGRAC CARRGE WARGE WARGE CARRED RATE OUTSHEOT EXTENSION INVOLVING CONSTRUCTION OF A CONSECUATORY STYLE GLAZED ROOM Reference number: NYML ONOSIS PA Date of decision (DD/MMYYYY): ZG Q ZGOO (date must be pre-application submission) Resease state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSECUATORY Please state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSECUATORY Please state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSECUATORY STYLE CLAZED ROOM Reference number: NYML ONOSIS PA Date of decision (DD/MMYYYY): ZG Q ZGOO (date must be pre-application submission) Has the development already started? If Yes please state when the development started (DD/MMYYYY): DOOC? (date must be pre-application submission)	1 TOOP IN TORESTIFE	NYM/ENQ/06055						
Details of pre-application advice received? Details of pre-application advice received?	Postcode (optional): YO 13 OAR	Date (DD/MM/YYYY):						
Easting: Northing:								
REPLACEMENT OF WOODEN SASH WINDOWS Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF RYISTING CARLAGE WITH 2 STOREY EXTENSION INC. INTEGRAL CARLAGE NOTH 2 STOREY EXTENSION INVOLVING CONSTRUCTION OF A CONSELVATORY STYLE GLAZED ROOM Reference number: NYMMOMOSTS PA Date of decision (DD/MM/YYYY): 25 0 q 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONDITION NUMBER 6. 2. 7. NYMMPA 1.3 NAY 2010 5. Has the development already started? UYes No No (date must be pre-application submission) Has the development been completed? UYes No (date must be pre-application submission)		REFERRED TO ADVICE IN AUTHORITYS						
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACIENT OF EXISTING CLARAGE WITH 2 STOREY EXTENSION I INC. INTEGRAL CLARAGE NOODEST OUTSHOOT EXTENSION INVOLVING CONSTRUCTION OF A CONSERVATORY STYLE CLARED ROOM Reference number: NYMM O24 O513 PA Date of decision (DD/MM/YYYY): 25 Oq 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONSTRUCTION OF A CONSERVATORY	Description:	DESIGN GUIDE PART ROZ CONCERNING						
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF EXISTING CARLAGE WITH 2 STOCKY EXTENSION INC.INTEGLAL CARLAGE NOBEST OUTSHOOT EXTENSION INVOLVENCE CONSTRUCTION OF A CONSERVATORY STYLE CLAZED ROOM Reference number: NYMMODY OST3 PA Date of decision (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONDITION NUMBER 6. 2. 7. NYMMDA 3. 8. 1.3 MMY 2010 5. 10. Has the development already started? Yes No (date must be pre-application submission) Has the development been completed? Yes No (date must be pre-application submission)		REPLACEMENT OF WOODEN SASH WINDOWS						
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF EXISTING CARLAGE WITH 2 STOCEY EXTENSION INC.INTEGLAL CARLAGE WORKST OUTSHOOT EXTENSION INVOLVENCE, CONSTRUCTION OF A CONSERVATORY STYLE GLAZED ROOM Reference number: NYMMODY OSTOC CONSTRUCTION OF A CONSERVATORY STYLE GLAZED ROOM Please state the condition number(s) to which this application relates: 1. CONDITION NUMBER 6. 2. 7. NYMMPA 3. 8. 1.3 MW 2010 5. 10. Has the development already started?								
Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: REPLACEMENT OF EXISTING CARLAGE WITH 2 STOCEY EXTENSION INC.INTEGLAL CARLAGE WORKST OUTSHOOT EXTENSION INVOLVENCE, CONSTRUCTION OF A CONSERVATORY STYLE GLAZED ROOM Reference number: NYMMODY OSTOC CONSTRUCTION OF A CONSERVATORY STYLE GLAZED ROOM Please state the condition number(s) to which this application relates: 1. CONDITION NUMBER 6. 2. 7. NYMMPA 3. 8. 1.3 MW 2010 5. 10. Has the development already started?	5. Description Of Your Proposal							
Reference number: Wywwowlosia PA Date of decision (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. Condition Number 4 6. 2. 7. NYMAPA 3. 8. 13 MAY 2010 Has the development already started? If Yes please state when the development started (DD/MM/YYYY): 200(?) (date must be pre-application submission) Has the development been completed? Yes No (date must be pre-application submission)	Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:							
Reference number: NYMMONGOSIS PA Date of decision (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONSTITION NUMBER 4 6. 2. 7. NYMNPA 3. 8. 13 NAY 2010 4. 9. 5. 10. Has the development already started? Yes No If Yes please state when the development started (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Has the development been completed? Yes No		WING CONSTRUCTION OF A CONSGRIATORY						
Reference number: NYMHONGS PA Date of decision (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Please state the condition number(s) to which this application relates: 1. CONSTITUTE NUMBER 4 6. 2. 7. NYMNPA 3. 8. 13 MAY 2010 4. 9. 13 MAY 2010 Has the development already started? If Yes please state when the development started (DD/MM/YYYY): 25 09 2000 (date must be pre-application submission) Has the development been completed? LYES NO (date must be pre-application submission)	14	William Constitute (or six in Constitute (or						
Please state the condition number(s) to which this application relates: 1. Condition Dumber(s) to which this application relates: 2. 7. NYMAPA 3. 8. 13 MAY 2010 Has the development already started? If Yes please state when the development started (DD/MM/YYYY): Has the development been completed? Yes No (date must be pre-application submission)		/data must be pre-application						
1. CONSITION NUMBER 4 6. 2. 7. NYMNPA 3. 8. 13 MAY 2010 4. 9. 13 MAY 2010 Has the development already started?		submission)						
2. 7. NYMNPA 3. 8. 13 NAY 2010 Has the development already started?	Please state the condition number(s) to which this application relat	es:						
3. 8. 9. 13 MAY 2010 5. 10. Yes please state when the development started (DD/MM/YYYY): 2000(?) (date must be pre-application submission) Has the development been completed? Yes No (date must be pre-application submission)	1. CONSITION NUMBER 4	6.						
4. 9. 13 MAY 2010 5. 10. Wes please state when the development started (DD/MM/YYYY): 2000(?) (date must be pre-application submission) Has the development been completed? Ves No (date must be pre-application of the development started (DD/MM/YYYY): (date must be pre-application of the development been completed)	2.	7. NYMADA						
Has the development already started? If Yes please state when the development started (DD/MM/YYYY): Ves No (date must be pre-application submission)	3.	8. 16 NW 20						
Has the development already started? If Yes please state when the development started (DD/MM/YYYY): Looo(?) (date must be pre-application submission) Has the development been completed? (date must be pre-application of the development started) (date must be pre-application of the development started)	4.	9.						
If Yes please state when the development started (DD/MM/YYYY): Looo(?) (date must be pre-application submission) Has the development been completed? (date must be pre-application (date must be pre-application)	5.	10.						
Has the development been completed? Ves No (date must be pre-application)	Has the development already started?							
(date must be pre-application								
(date must be pre-application								
If Yes please state when the development was completed (DD/MM/YYYY): (2/03/2002 submission)								
6. Condition(s) - Removal								
Please state why you wish the condition(s) to be removed or changed:								
WE WISH TO REPLACE ALL EXISTING WOODEN WINDOW FRAMES WITH DUBLE GLAZED UPVC UNITS AS DETAILED IN ENLOSED SHEET!								
If you wish the existing condition to be changed, please state how you wish the condition to be varied:								
the wish Town Too 16 To De Ochara								
WE WISH CONDITION 4 TO BE REMOVE)								

7. Certificates (continued)								
CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7								
I certify/ The applicant certifies that: Certificate A cannot be issued for this application NV/M 2040 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0								
this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to which this application relates, but I have/the applicant has been unable to do so								
The steps taken were:								
Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):					On the following date (whi than 21 days before the da	ch must not be earlier te of the application):		
Signed - Applicant:		Or signed - Agent:			Date DD/MM/YYYY:			
Town and Country Plans	ning (General De	velopmer	LDINGS CER	TIFIC e)Ord	ATE ler 1995 Certificate under	Article 7		
Agricultural Land Declaration - You Must (A) None of the land to which the app	Complete Either A olication relates is,	or B , or is part	of, an agricul	tural	holding.			
Signed - Applicant:		Or signed	d - Agent:		•••	Date DD/MM/YYYY:		
					# 11180 Section 1	06/05/2010		
B) I have/ The applicant has given the before the date of this application, was a as listed below:	e requisite notice I tenant of an agri	to every p cultural ho	person other olding on all	than or pa	myself/ the applicant who, or tof the land to which this a	on the day21 days application relates,		
Name of Tenant			Address	S		Date Notice Served		
			energy control of the	-	A CHANAVIA			
				Contraction of the Contraction o	NYMNPA			
					13 MAY 2010			
	***************************************			4 inspectors				
Signed - Applicant:		Or signed	l - Agent:			Date DD/MM/YYYY:		
8. Planning Application Require	ments - Check	dist						
Please read the following checklist to mak	ke sure you have s	sent all the	information	in su	pport of your proposal. Fail	lure to submit all		
information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.								
3 copies of a completed and dated application form: 3 copies of other plans and drawings or information necessary to describe the subject of the application:								
9. Declaration								
/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.								
Signed - Annlicant			Or signed -	Agen	ıt:			
Date (DD/MM/YYYY):								
OG/OC/2010 (date cannot be pre-application)								

10. Applicant Contact Details	11	11. Agent Contact Details						
Telephone numbers	Te	Telephone numbers						
Country code: National number: Extensional number: number (optional): Country code: Mobile number (optional): Country code: Fax number (optional):	er: G	Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional):						
Email address (optional):	Er	Email address (optional):						
12. Site Visit								
Can the site be seen from a public road, public footpath, bridle	ay or othe	er public land? Yes No						
If the planning authority needs to make an appointment to car out a site visit, whom should they contact? (Please select only or	y 2)	Agent Other (if different from the agent/applicant's details)						
If Other has been selected, please provide:								
Contact name:	Tel	Telephone number:						
Email address:								

NYMNPA 13 MAY 2010