

North York Moors National Park Authority

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The Old Vicarage
Bondgate
Helmsley
York
YO62 5BP

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

2010/0686

Application for a non-material amendment following a grant of planning permission.

Town and Country Planning Act 1990

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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: MR First name: Roy	Title: First name:	
Last name: TAM	Last name:	
Company (optional):	Company (optional):	
Unit: House Number: House suffix:	Unit: House House suffix:	
House name: This clarit	House name:	
Address 1: NDWHOLM	Address 1:	
Address 2:	Address 2:	
Address 3:	Address 3:	
Town: 10417371	Town:	
County: NORTH MORKS	County: .	
Country:	Country:	
Postcode: Yozi 3QT	Postcode:	

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27 AUG 2010

Rease provide the full postal address of the house number: House NEWHOLE Address 1: Address 2: Address 3: Town: County: Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not know Easting: Northing Description:	House suffix:	4. Pre-application Advice Has assistance or prior advice been sought authority about this application? If Yes, please complete the following inform you were given. (This will help the authority application more efficiently). Please tick if the full contact details are not known, and then complete as much as post officer name: The CATRUSCH'S CATRU	Yes No No nation about the advice y to deal with this sible: ASSISTANT
If you are not the sole owner, has notification	uestion, you cannot under article 4F(3) of uestion, you cannot please give details of p	ot apply to make a non-material ame of the GDPO been given? Yes No ot apply to make a non-material ame	Not Applicable
6. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member If yes please provide details of the name		Do any of these statements apply to you?	NIVER AND THE

Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Fallure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.			
The original and 3 copies of a completed and dated application form:			
The Original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:			
The correct fee:			
10. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applic Or signed - Agent:	ols form and the accompanying plans/drawings and additional Date (DD/MM/YYYY);		
11. Applicant Contact Details	12. Agent Contact Details		
Country code: National number: Country code: Mobile number (ontional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):		
Talephone number: Tan the site be seen from a public road, public footpath, bridleway or other public land? Yes No No Applicant Other (if different from the agent/applicant's details) If Other has been selected, please provide: Contact name: Telephone number:			

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7. Description Of Your Proposal				
Please provide a description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below. Please also provide the original application type:				
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1 - C PA	THIS LOUND HET			
MORE 1-16-18- 14	AND BE SAFER FOR THE 3			
Your CHILDERY IN THE COTTAGE				
Reference number:	Date of decision (DD/MM/YYYY):			
What was the original application type?: (e.g. 'Full','Householde r and Listed Building', 'Out line				
8. Non-Material Amendment(s) Sought				
Please describe the non-material amendment(s) you	are seeking to make:			
No				
11(0)				
Are you intending to substitute amended plans or dr	awings? Wes No EDCLOSED			
If Yes, please complete the following:	awlings? Yes No ENCLOSED			
Old plan/drawing number(s):				
New plan/drawing number(s):				
Please state why you wish to make this amendment:				
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	alos sun			
	3 Mrs.			
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