



NYM / 2011 / 0 4 1 2 / FL

Bondgate Helmsley York

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

2011/04/12

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

Within 12 months

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. Applicant Name and Address				
Title:	MRS First name: JAYNE			
Last name:	STOLL			
Company (optional):				
Unit:	House number: 115 House suffix:			
House name:				
Address 1:	ELLERTON ROAD			
Address 2:				
Address 3:				
Town:	SURBITON			
County:	SURREY			
Country:				
Postcode:	KTG FUA			

2. Agent	Name and Address
Title:	First name:
Last name:	
Company (optional):	
Unit:	House number: House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	NYMNPA
County:	2 8 JUN 2011
Country.	
Postcode:	

Please ide the full postal address of the application site.	4. Pre-application Advice			
	Has assistance or prior advice been sought from the local authority about this application?			
Unit: House number: House suffix:				
House name: BEACON WINDMILL	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: JUNCTION SCARBOROUGH ROAD/RAVEN HALL ROAD	application more efficiently). Please tick if the full contact details are not			
Address 2:	known, and then complete as much as possible:			
Address 3:	Officer name:			
Town: RAVENSCAR	MRS HILARY SAUNDERS Reference:			
County: NORTH YORKSHIRE	email			
Postcode (optional): YO (3 OFR	Date (DD/MM/YYYY): (must be pre-application submission)			
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received? To PRESENT			
Easting: Northing:	NYM / 2011 / 0 4 1 2 / F L			
Description:	NIM ZUII / U 4 I Z / P L			
5. Description Of Your Proposal	the state of the s			
Please provide a description of the approved development as shown and date of decision in the sections below:				
COUVERSION OF DERELICT W	INDMILL AND GRANARY BARN,			
CONSTRUCTION OF GLAZED I	INK CORRIDOR TO FORM			
1 NO HOLIDAY COTTAGE AT BE	EACON WINDMILL, JUNCTION			
OF SCARBOROUGH/RAVENH	ALC ROAD, RAVENSCAR.			
Reference number: NYM/2010/0887/FL Date of decision (E	DD/MM/YYYY): 01/04/2011 (date must be pre-application submission)			
Please state the condition number(s) to which this application relate				
1.	6.			
2.	7.			
(3.) "HOLIDAY LETING"	8. NYMNPA			
3. "HOLIDAY LETING"	8. NYMNPA 9. 2 8 JUN 2011			
	8. 2.8 HIN 2011			
4. 5.	9. 2 8 JUN 2011			
4. 5. Has the development already started?	9. 2 8 JUN 2011 10.			
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4. 5. Has the development already started? If Yes please state when the development started (DD/MM/YYYY): Has the development been completed?	9. 2 8 JUN 2011 10. Yes No (date must be pre-application submission) Yes No			
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Agricultural Land Declaration - You Must (AGRICULTURAL HOLDING: ning (General Development Proc Complete Either A or B	edure)Order 1995 Certifica	ite under Article 7
(A) None of the land to which the app Signed - Applicant:	olication relates is, or is part of, an a Or signed - Agei	in the second	Date DD/MM/YYYY:
7			25/06/2011
B) I have/The applicant has given the before the date of this application, was a as listed below:	e requisite notice to every person tenant of an agricultural holding of	other than myself/ the applic on all or part of the land to w	cant who on the day21 days.
Name of Tenant	A	ddress	Date Notice Served
		28	JUN 2011
			JUN 2011
Signed - Applicant:	Or signed - Ager	nt:	Date DD/MM/YYYY:
8. Planning Application Require Please read the following checklist to mak information required will result in your ap the Local Planning Authority has been sub	e sure you have sent all the inform plication being deemed invalid. It	nation in support of your pro will not be considered valid	posal. Failure to submit all until all information required by
3 copies of a completed and dated applica		3 copies of other plans and de necessary to describe the sub	
9. Declaration			
I/we hereby apply for planning permissior information.	n/consent as described in this form	and the accompanying plar	ns/drawings and additional
Signed - Applicant:	Or sig	ned - Agent:	
Date (DD/MM/YYYY): 25 06 20 1 (date cann	not be pre-application)		

10. Applicant Contact Details	Day of the	11. Agent Contact Details							
Teleph numbers		Telephone numbers							
	Extension number:	Country code: National number: Extension number:							
Country code: Mobile number (optional):		Country code: Mobile number (optional):							
Country code: Fax number (optional): Email address (optional):		Country code: Fax number (optional): Email address (optional): NYM / 2011 / 0 4 1 2 / F L							
12. Site Visit	12. Site Visit								
Can the site be seen from a public road, public footpath,	bridleway or	r other public land? Yes No							
If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select)	to carry only one)	Agent Applicant Other (if different from the agent/applicant's details)							
If Other has been selected, please provide: Contact name:		Telephone number:							
Email address:									



VALIDATION CHECKLIST

APPLICATION for REMOVAL or VARIATION of a condition following grant of planning permission (section 73 of the Town and Country Planning Act 1990)



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 ele	ctronically)			
Completed application form including Location Plan	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.				
Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995	YES	N/A 🗌		
Application fee PLEASE ADVISE/CONFIRM FEE (NO FEE BECAUSE THIS APPLICATION	YES□	NO		
IS WITHIN 12 MONTHS OF THE				

