

NYM / 2011 / D 6 1 6 / L B

The Old Vicarage Bondgate Helmsley York YO62 5BP

11/616

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

North York Moors National Park Authority

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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as inc	correct completion will delay the processing of your application.
1. Applicant Name and Address	2. Agent Name and Address
Title: MA First name: MAKE	Title: First name:
Last name: THOMAS	Last name:
Company (optional):	Company (optional):
Unit: House number: House suffix:	Unit: House House number: NYM Suffix:
House BAY NESS FARM	House name: 12 SEP 2011
Address 1: ROBIN HOODS BAY	Address 1:
Address 2: WU,TBb	Address 2:
Address 3:	Address 3:
Town:	Town:
County: N. Mant	County:
Country: [N61AND	Country:
Postcode: MDZZ 4PJ	Postcode:
3. Description of Proposed Works	
Please describe the proposals to alter, extend or demolish the listed h	quilding(s):

P	lease describe the proposals to alter, ext	end or demol	ish the listed building(s):	- W. (1)	
	CONVERSION	06	BARN	70	HIUUSE
				i i	

3. Description of Proposed Works (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
Ha de work already started without consent?	Unit: House number: House suffix:
If Yes, please state when the	House BAY NESS FARM
work was started (DD/MM/YYYY):	Address 1: ROBIN NIOODS
	Address 2: BAN
	Address 3:
(date must be pre-application submission)	Town: WUITBY
Has the work been	County: N. YONKS
completed without consent?	Postcode (optional): 7077 LPS
If Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):
work was completed (DD/MM/YYYY):	Easting: Northing:
	Description:
	TIN ROOFED BARN AT NONTHEAST END OC PROPERTY
(date must be pre-application submission)	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	07- 110000
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site? \square Yes \square No \forall	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
Deference	you were given. (This will help the authority to deal with this
number	application more efficiently). Please tick if the full contact details are not
*NOT LON MILS BALN	known, and then complete as much as possible:
	Officer name:
	NYM / ZUIT / HOLD A
	Reference:
	1 2 SEP 2011
	Date (DD/MM/YYYY):
	(must be pre-application submission) Details of pre-application advice received?
	7
	<i>y</i> .
7. Neighbour and Community Consultation	8. Council Employee / Member
Have you consulted your neighbours or	Is the applicant or agent related to
Have you consulted your neighbours or	
Have you consulted your neighbours or the local community about the proposal? Yes No	Is the applicant or agent related to any member of staff or elected
7. Neighbour and Community Consultation Have you consulted your neighbours or the local community about the proposal? Yes No If Yes please provide details:	Is the applicant or agent related to any member of staff or elected member of the council?
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31	Existing (where applicable)	Proposed M / 2011 / n, 6 / 6. / L B	Not applica	Don's Knov
External walls	STONE	STONE		
Roof covering	TIN	PANTILE		
Chimney		METAL		
Windows	WOOD	WOOD		
External doors	W000	WOOD		
Ceilings	711/wood	D WOOD/PLASTER		
Internal walls	STONE	STONE / BLOCK		
Floors	CONLNETE) SOIL	(ONLAETE/web)	>	
Internal doors	WOOD	Wood		
Rainwater goods	Mrtal	Meral		
Boundary treatments (e.g. fences, walls)	55 ON E	STONE 12 SE	1NPA P 2011	
Vehicle access and hard standing				
-ighting	loweneng	1 In fucuen		
Others add description)				
	tional information on submitted drawings s)/drawing(s) references:	or plans? Yes No		

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or to emolition of a listed building?	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve? a) Total demolition of the listed building: Yes No	If Yes, do the proposed works include: (you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building: Yes No	a) Works to the interior of the building?
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No
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?
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)?
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	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
Please provide a brief description of the building or part of the building you are proposing to demolish:	structural support and state references for the plan(s)/drawing(s):
	NOT REMOVING ANY
	GINISH ONE BITOR
	WALL WILLBE COVELED
	MAM THE FLOOR WILL
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	BE CONCRETED TOTALY
	NYM / 2011 / 0 6 1 6 / L B
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only	Has a Certificate of Immunity from Listing been sought in respect of this building?
one box must be ticked)	Yes Don't know
Grade I Ecclesiastical Grade II	If Yes, please provide the result of the application;
Grade II Ecclesiastical Grade II*	1 2 SEP 2011
Grade II* Don't know	
Ecclesiastical Grade I	

15. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in 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:	he information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by 3 copies of of other plans and drawings or information necessary to describe the subject of the application: 3 copies of of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):
16. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applicant: Or signed - Agent:	
Telephone numbers Country code: National number: Country code: Mobile number (optional): 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):
19. Site Visit Can the site be seen from a public road, public footpath, bridleway or of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) of Other has been selected, please provide: Contact name: THOMAS Email address:	r other public land? Yes No Applicant Other (if different from the agent/applicant's details) Telephone number:

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16. Declaration I/we hereby apply for planning permission/consent as described information. Signed - Applicant: Or signed - Age	
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	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 footpath, bridlewa If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: Contact name:	2002/2002
Email address:	\$Date: 2007/05/11 09:53:51 \$ \$Revision: 1.16 \$