

NYM / 2011 / 0794 / 1.1

11/794

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

Householder Application for Planning Permission for works or extension to a dwelling and listed building consent. Town and Country Planning Act 1990

LB exempt

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 the 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				2. Agent Name and Address			
Title:	(1) MR (2) MRS	First name:	GORDON DENISE	Title:		First name:	
Last name:	WEARMOUTH			Last name:			
Company (optional):				Company (optional):			
Unit:		House number:	31	House suffix:		Unit:	
House name:	COACH HOUSE			House name:			
Address 1:	NORLINTON CLOSE			Address 1:			
Address 2:	ORLINGBURY			Address 2:			
Address 3:	KENTON ROAD			Address 3:			
Town:	KETTERING			Town:			
County:	NORTHANTS			County:			
Country:	ENGLAND			Country:			
Postcode:	NN14 1FD			Postcode:			

NYM/NPA
28 NOV 2011

3. Description of Proposed Works

Please describe the proposed works:

REPLACE TWO WINDOWS.
THE EXISTING WINDOW FRAMES ARE ROTTEN.
THE NEW WINDOWS WILL BE TRADITIONALLY DESIGNED ("WHITBY COMPOSITE")
WITH SLIM (4-4-4 PROFILE) DOUBLE GLAZED UNITS.

Has the work already been started without planning permission?

Yes No

If Yes, please state when the works were started (DD/MM/YYYY):

N/A

(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/YYYY):

N/A

(date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name: THE HAVERN WASH HOUSE

Address 1: CHAPEL STREET

Address 2: ROBIN HOODS BAY

Address 3:

Town: WHITBY

County: NORTH YORKSHIRE

Postcode (optional): YO22 4SQ

Description of location or a grid reference. (must be completed if postcode is not known):

Easting: Northing:

Description:
WASH HOUSE IS A SINGLE STOREY STONE BUILT BUILDING STANDING ABOVE THE BECK, NEXT DOOR TO THE 'BAKERY'. THE WINDOWS CAN BE SEEN FROM NEW ROAD.

5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

If Yes, please complete the following information about the advice 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 as possible:

Officer name: CLAIR SHIELDS

Reference: 2011/ENG. 7764

Date (DD/MM/YYYY): (must be pre-application submission) 16 NOV 2011

Details of pre-application advice received?
INSTALLATION OF DOUBLE GLAZING TO BOTH WINDOWS REQUIRE LISTED BUILDING CONSENT, WITH PLANNING PERMISSION TO LARGER WINDOW. THE PROPOSED ALTERATION WOULD LIKELY RECEIVE FAVOURABLE CONSIDERATION AS THE STYLE OF WINDOW PROPOSED IS 'WHITBY COMPOSITE'.
NYMNP
28 NOV 2011

6. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway? Yes No

Is a new or altered pedestrian access proposed to or from the public highway? Yes No

Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes No

If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s)

7. Trees and Hedges

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 plan(s)/drawing(s):

2011/0794/1/3

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 numbers e.g. T1, T2 etc and state the reference number of the plan(s)/drawing(s) and indicate the scale:

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Roof covering			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chimney			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windows	SMALL WINDOW : WOOD, YORKSHIRE SASH LARGE WINDOW : WOOD. ALTERATIONS MADE OVR YEARS TO OPENING STYLE	→ SAME DESIGN, SLIM DOUBLE GLAZE → WH MAY COMPOSITE, SLIM DOUBLE GLAZE.	<input type="checkbox"/>	<input type="checkbox"/>
External doors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Ceilings			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal walls			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Floors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal doors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rainwater goods			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard standing			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others (add description)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

NYMNI PA
28 NOV 2011

Are you supplying additional information on submitted drawings or plans? Yes No

If Yes, please state plan(s)/drawing(s) references:

GORDON WEARMOUTH 11/11/2011 DRAWING SCALE 1:10

Does the proposal include the partial or total demolition of a listed building? Yes No

If Yes, which of the following does the proposal involve?

- a) Total demolition of the listed building: Yes No
- b) Demolition of a building within the curtilage of the listed building: Yes No
- c) Demolition of a part of the listed building: Yes No

If the answer to c) is Yes:

i) What is the total volume of the listed building?(cubic metres)	N/A
ii) What is the volume of the part to be demolished?(cubic metres)	N/A
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	N/A

Please provide a brief description of the building or part of the building you are proposing to demolish:

N/A

Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?

N/A

Do the proposed works include alterations to a listed building? Yes No

If Yes, do the proposed works include: (you must answer each of the questions)

- a) Works to the interior of the building? Yes No
- b) Works to the exterior of the building? Yes No
WINDOWS
- c) Works to any structure or object fixed to the property (or buildings within its curtilage) internally or externally? Yes No
- d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No

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 structural support and state references for the plan(s)/drawing(s):

REFER ATTACHED DRAWING OF BOTH WINDOWS

NYMNPA
28 NOV 2011

11. Listed Building Grading

Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)

- Grade I Ecclesiastical Grade I
- Grade II Ecclesiastical Grade II
- Grade II* Ecclesiastical Grade II*
- Don't know

12. Immunity From Listing

Has a Certificate of Immunity from Listing been sought in respect of this building?

- Yes No Don't know

If Yes, please provide the result of the application:

NYMNPA 28 NOV 2011

13. Parking

Will the proposed works affect existing car parking arrangements? Yes No

If Yes, please describe:

14. Council Employee / Member

Is the applicant or agent related to any member of staff or elected member of the Council? Yes No

If Yes, please provide details:

AGRICULTURAL HOLDINGS CERTIFICATE

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You Must Complete Either A or B

(A) None of the land to which the application relates is, or is part of, an agricultural holding.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

21/11/2011

B) I have/The applicant has given the requisite notice to every person other than myself/the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

Name of Tenant	Address	Date Notice Served
/		

N/A
28 NOV 2011

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

16. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure 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: <input checked="" type="checkbox"/> | 3 copies of a design and access statement where proposed works fall within one of the following designated areas: <input type="checkbox"/> | The correct fee: (NIL) <input type="checkbox"/> |
| 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: <input checked="" type="checkbox"/> | <ul style="list-style-type: none"> • National Park • Site of special scientific interest • Conservation area • Area of outstanding natural beauty • World Heritage Site • The Broads | 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): <input checked="" type="checkbox"/> |
| 3 copies of other plans and drawings or information necessary to describe the subject of the application: <input checked="" type="checkbox"/> | | 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable): <input checked="" type="checkbox"/> |

17. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

21/11/2011

(date cannot be pre-application)

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	
Email address (optional):		
<input type="text"/>		

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	
Email address (optional):		
<input type="text"/>		

20. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? *(Please select 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:

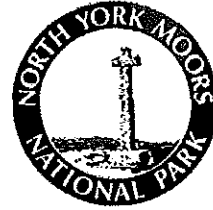
NYMNS 2011 / 0794 / 1.0

NYMNS
28 NOV 2011

VALIDATION CHECKLIST

PLANNING PERMISSION AND LISTED BUILDING CONSENT

For alterations, extension or demolition of a listed building



Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.

STANDARD REQUIREMENTS:

(1 original and 3 copies to be supplied unless that application is submitted electronically)

Completed application form	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
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 and by Regulation 6 of the Planning (Listed Building and Conservation Areas) regulations 1990.	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Location Plan at a scale of 1:2500 or 1:1250 with your application site edged red and any other land in your ownership edged in blue.	YES <input checked="" type="checkbox"/>	N/A <input type="checkbox"/>
Existing site layout plans at a scale of 1:100, 1:200 or 1:500 showing the site in relation to existing buildings and site boundaries. The plan should indicate where existing features of the site are located including existing buildings (indicating proposed demolitions), trees (identifying any proposed felling), means of access and type of enclosure (wall, fence, hedges) and shall show adjacent properties/buildings.	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Proposed site layout plans at a scale of 1:500, 1:200 or 1:100	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Existing and proposed elevations to a scale of 1:50 or 1:100 Requirements dependent on position of extension eg. no front elevation required for rear extension etc.	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Existing and proposed floor plans to a scale of 1:50 or 1:100 For each floor ie, ground and first floor required for two storey extension	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Roof plans to a scale of 1:50 or 1:100 If the proposal alters the existing roof	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Existing and proposed site sections and finished floor levels and site levels at a scale of not less than 1:100	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>
Design and Access Statement	YES <input type="checkbox"/>	N/A <input checked="" type="checkbox"/>

NYMMNPA
 28 NOV 2011

Application fee

Please consult our enclosed Schedule of Fees.
Cheques are to be made payable to NYMNPA

N/A

YES

NO

Manufacturers specification/leaflet for proposals incorporating
plant/machinery (swimming pools/wind turbines/satellite
dishes/solar panels/rooflights)

N/A

YES

N/A

SOME OR ALL OF THE FOLLOWING INFORMATION MAY ALSO BE REQUIRED:

Biodiversity Survey and Report (Nature Conservation and Ecological
Assessment)

YES

N/A

Flood Risk Assessments/ Sequential Test (flood zones)

YES

N/A

Statement of agricultural need

YES

N/A

Tree Survey/Arboriculture Assessment

YES

N/A

Where ground based works within 2 metres of the crown spreads of any trees
covered by Tree Preservation Order or tree located within a Village
Conservation Area

NYMNPA
28 NOV 2011