

NYM / 2012 / 0 5 6 3 / N M

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

2012/0563

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

Town and Country Planning Act 1990

125#11717

NYMNPA 7 AUG 2012

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:	MVV First name: VV	Title: MW First name: W	
Last name:	GNUNK	Last name: BLENKNAVA	
Company (optional):		Company (optional): BUANMAN BLENICHANN	
Unit:	House number: House suffix:	Unit: House House suffix:	
House name:	CONESTIBANIC	House name: MAMNITS	
Address 1:	DAKRIE DAKN	Address 1:	
Address 2;		Address 2:	
Address 3:	MODIN HOUSE DAY	Address 3:	
Town:	Nyorksmine	Town: MANON	
County:		County: N YUNGSMINE	
Country:		Country:	
Postcode:	YULL ARD	Postcode: YUI7 70P	

3. Site Address Details Please provide the full postal address of the application site. Unit: House number: House suffix: House number: Suffix: House suffix: House suffix: House suffix: House number: Suffix: House suffix: Ho	4. Pre-application Advice Has assistance or prior advice been sought fauthority 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 posson of the full contact details are not known, and then complete as much as posson. Officer name: Reference: Date of advice (DD/MM/YYYY): Details of pre-application advice received:	Yes No nation about the advice y to deal with this sible: 17 07 2012			
Bodination					
If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered Yes to this question, please give details of persons notified:					
Person Notified	Address	Date of Notification			
	Now Mark State of the State of				
6. Authority Employee / Member	Do any of these statements apply to you?				
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	Yes No				
If yes please provide details of the name, relationship and	role				

7. Description Of Your Proposal			
Please provide a description of the approved development as shown on the declare of decision in the sections below. Please also provide the original applicati	cision letter, including application reference number and on type:		
REMANA OF 5 M TREES AS			
SHOWN ON ATTACKED			
DRAMING 0977_01_ARIO_			
1/_01_AV210_	-01-A		
Reference number:	Day of the state of ODMHANOON		
Reference number:	Date of decision (DD/MM/YYYY):		
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')			
8. Non-Material Amendment(s) Sought	1		
Please describe the non-material amendment(s) you are seeking to make:			
SEE 7 ADULE	NYMNPA -7 AUG 2012		
Are you intending to substitute amended plans or drawings?	Yes No		
If Yes, please complete the following:			
Old plan/drawing number(s):			
0977-01-AV10-0	I		
New plan/drawing number(s):			
0977-01- AN10-01	- A		
Please state why you wish to make this amendment:			
TUDES IMPUMENTE MAN	SELLYCE		
DUMMAGE & CONSTICUOTEN	ÜF		
ETROSION.			

Application Requirements - Checklist lease read the following checklist to make sure you have sent all the information in support of your proposal. Fallure to submit all afformation required will result in your application not being accepted. It will not be accepted until all information required by the ocal Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form:				
he original and 3 copies of other plans and drawings or information ecessary to describe the subject of the application:				
he correct fee:				
O. Declaration five hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Signed - Applicant: O-the distribution Date (DD/MM/YYYY):				
1. Applicant Contact Details 12. Agent Contact Details				
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Extension number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):				
13. 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:				
Finall addresss				

