



North York Moors National Park Authority  
The Old Vicarage  
Bunsbygate  
Helmsley  
York  
YO62 5BP

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20120596

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

KISO# 11742  
21/8/12

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: MR/MRS First name: DAVE + CHRISTINE  
Last name: M<sup>C</sup>CONNELL  
Company (optional):  
Unit: House number: 17 House suffix:  
House name:  
Address 1: RIGG VIEW  
Address 2: STAINJACRE  
Address 3:  
Town: WHITBY  
County: NORTH YORKSHIRE  
Country: UK  
Postcode: YO22 4NR

**2. Agent Name and Address**

Title: MR First name: LOUIS  
Last name: STAINTHORPE  
Company (optional): BELL SNOXELL BUILDING CONSULTANTS  
Unit: House number: House suffix:  
House name: BARCLAYS BANK HOUSE  
Address 1: BAXTERGATE  
Address 2:  
Address 3:  
Town: WHITBY  
County: NORTH YORKSHIRE  
Country: UK  
Postcode: YO22 1BW

**3. Description of Proposed Works**

Please describe the proposed works:

DEMOLISH EXISTING GARAGE AND CONSTRUCT NEW GARAGE

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**3. Description of Proposed Works (continued)**

Has the work already been started without planning permission?  Yes  No  
 If Yes, please state when the works were started (DD/MM/YYYY):  (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):  (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:   
 Address 1:   
 Address 2:   
 Address 3:   
 Town:   
 County:   
 Postcode (optional):

**5. 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):

**6. 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 possible:   
 Officer name:   
 Reference:   
 Date (DD MM YYYY):   
 (must be pre-application submission)  
 Advice given:

**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 plans or drawings:  
  
 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 any plans or drawings:

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**8. Parking**

Will the proposed works affect existing car parking arrangements?  Yes  No  
 If Yes, please describe:

**9. 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:

**10. Materials**

If applicable, please state what materials are to be used externally. Include type, colour and name for each material:

|   | Existing<br>(where applicable)           | Proposed                     | Not<br>applicable                   | Don't<br>Know            | Drawing<br>references if<br>applicable |
|---|--|------------------------------|-------------------------------------|--------------------------|--|
| Walls                                       | BRICK                                    | BRICK.                       | <input type="checkbox"/>            | <input type="checkbox"/> |  |
| Roof  | CONCRETE<br>TILES                        | CONCRETE<br>TILES.           | <input type="checkbox"/>            | <input type="checkbox"/> |  |
| Windows                                     | WHITE<br>PLASTIC                         | WHITE<br>PLASTIC             | <input type="checkbox"/>            | <input type="checkbox"/> |  |
| Doors                                       | WHITE PLASTIC<br>+ STEEL GARAGE<br>DOOR. | INSULATED<br>GARAGE<br>DOOR. | <input type="checkbox"/>            | <input type="checkbox"/> |  |
| Boundary treatments<br>(e.g. fences, walls) |  |                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  |
| Vehicle access and<br>hard-standing         | BRICK<br>PAVERS                          | BRICK<br>PAVERS              | <input type="checkbox"/>            | <input type="checkbox"/> |  |
| Lighting                                    |  |                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  |
| Others<br>(please specify)                  |  |                              | <input checked="" type="checkbox"/> | <input type="checkbox"/> |  |

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Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?  Yes  No

If Yes, please state references for the plan(s)/drawing(s)/design and access statement:

DRAWINGS : - 001 LOCATION PLAN  
002 EXISTING BLOCK PLAN  
003 PROPOSED BLOCK PLAN  
004 PROPOSED ELEVATIONS + SECTION.



**14. Applicant Contact Details**

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

**15. Agent Contact Details**

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

**16. 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:

**12. 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. The correct fee:  The original and 3 copies of the following documents:

|   |   |  |
|---|---|--|
| The completed and dated application form <input checked="" type="checkbox"/>  | The completed, dated Article 7 Certificate (Agricultural Holdings) <input checked="" type="checkbox"/>        | A design and access statement where proposed works fall within one of the following designated areas: <input checked="" type="checkbox"/> N/A.   |
| 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"/> | The completed, dated Ownership Certificate (A, B, C or D - as applicable) <input checked="" type="checkbox"/> | <ul style="list-style-type: none"> <li>• National Park</li> <li>• Site of special scientific interest</li> <li>• Conservation area</li> <li>• Area of outstanding natural beauty</li> <li>• World Heritage Site</li> <li>• The Broads</li> </ul> |
| Other plans and drawings or information necessary to describe the subject of the application <input checked="" type="checkbox"/>                                      |   |  |

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