

North York Moors National Park Authority The Old Vicarage Bondgate Helmsley York Y062 5BP

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

2012/0679

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

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 formand 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.

Title:	MRS. First name: VICTORIA	Title: First name:
Last name:	HUDSON	Last name:
Company (optional):		Company (optional):
Unit;	House House suffix:	Unit: House number: House suffix:
House name:	HOLME - DEDE	House name:
Address 1:	SLEDGATES	Address 1:
Address 2:	FYLINGTHORPE.	Address 2:
Address 3:	N. YORKS.	Address 2: NYIVIVIA Address 3: 1007
Гоwn:		Town:
County:		County:
Country:		Country:
ostcode:	Y022 4TZ.	Postcode:

3. Site Address Details	4. Pre-application Advice			
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?			
Unit: House House suffix:	V 163 1 100			
House MIDDLEWOOD FARM.	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: MIDDLEWOOD LANE.	application more efficiently).			
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:			
Address 3:	Officer name:			
	MRS. H. SAUNDERS.			
Town: FYLINGTHORPG	Reference:			
County: N. YORKS.				
(optional):	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?			
Easting: Northing:				
Description:				
5. Description Of Your Proposal				
Please provide a description of the approved development as shown and date of decision in the sections below:				
TO APPLY FOR PERMENANT STORAGE OF TRAILER OVER WINTER				
MONTHS. (ABSOLUTELY NO TRADING)	NOVEMBER THROUGH TILL END FEBRUARY.			
(date must be pre-application				
Pataranca numbers 2 mg/s = 2 m	(date must be pre-application			
Reference number: 2011/02721=1 Date of decision (D	Submission)			
Please state the condition number(s) to which this application relates	submission)			
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8. 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: 3 copies of other plans and drawings or information necessary to describe the subject of the application:
9. 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):
OI 10 12 (date cannot be pre-application)
\$Date: 2007/05/11 0953:51 \$ \$Revision: 1.15 \$.

JO. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number:	Country code: National number: Extension number:				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
12. 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) If Other has been selected, please provide:	Agent Applicant Other (if different from the agent/applicant's details)				
Contact name:	Telephone number:				
Email address:					

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