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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

3/4/12

2013/0199

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990 E172#12090

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

. Applic	ant Name and Address	2. Agent Name and Address
tle:	Mr First name: Craig	Title: First name:
st name:	Hall	Last name:
mpany otional):		Company (optional):
it:	House House suffix:	Unit: House House suffix:
ouse me:	The Granary	House name:
ldress 1:		Address 1:
ldress 2: [Address 2:
dress 3:		Address 3:
wn:	Aislaby	Town:
ounty:	North Yorkshire	County:
untry:		Country:
stcode:	YO21 ISW	Postcode:

Additional Window to lounge on rear elevation



3. Description of Proposed Works (continued)									
Has the work already started? Yes X No	NYM / 2013 / 0 1 9 9 / F L								
If Ye lease state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)								
Has the work already been completed? Yes X No									
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)								
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way								
Please provide the full postal address of the application site. House House	Is a new or altered vehicle access proposed to or from the public highway? Yes X No								
onit: number: suffix:	Is a new or altered pedestrian access								
House name: The Granary	proposed to or from the public highway? Yes X No Do the proposals require any diversions,								
Address 1:	extinguishments and/or creation of public rights of way?								
Address 2:	If Yes to any questions, please show details on your plans or								
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):								
Town: Aislaby									
County: North Yorkshire									
Postcode (optional): YO21 1SW									
6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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: Peter Jones Reference: Date (DD MM YYYY): (must be pre-application submission) Details of the pre-application advice received: Could not see a problem with application	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? 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? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc., state the reference number of the plan(s)/drawing(s) and indicate the scale.								
8. Parking Will the proposed works affect	9. Authority Employee / Member With respect to the Authority, I am:								
existing car parking arrangements? Yes No	(a) a member of staff (b) an elected member Do any of these statements apply to you?								
If Yes, please describe:	(c) related to a member of staff (d) related to an elected member (d) related to an elected member								
	If Yes, please provide details of the name, relationship and role								
	\$Date: 2012-07-17 #\$ \$Revision: 4636 \$								

(please specify)	()	Existing (where applicable)	Proposed	Not applicable	Don't Know
Windows Timber Framed Timber Framed Doors Boundary treatments (e.g. fences, walls) Vehicle access and hard-standing Lighting Others (please specify)	Walls		PYM / 2013 / 0 1 9 9 / P		
Doors Boundary treatments (e.g. fences, walls) Vehicle access and hard-standing Lighting Others (please specify)	Roof				
Boundary treatments (e.g., fences, walls) Vehicle access and hard-standing Lighting Others (please specify)	Windows	Timber Framed	Timber Framed		
(e.g. fences, walls) Vehicle access and hard-standing Lighting Others (please specify)	Doors				
Lighting Cothers (please specify)					
Others (please specify)					
(please specify)	Lighting		-3 APR 2013		
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?					
f Yes, please state references for the plan(s)/drawing(s)/design and access statement:				es [No

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13. 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 original and 3 copies of a The original and 3 copies of a The correct fee: 1 design and access statement if proposed works fall within a completed and dated application form: V The original and 3 copies of a plan which The original and 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable): conservation area or identifies the land to which the application 1 World Heritage Site, or relate to a relates drawn to an identified scale Listed Building: \checkmark 7 and showing the direction of North: The original and 3 copies of other plans The original and 3 copies of the and drawings or information necessary to completed, dated Article 12 Certificate 7

describe the subject of the application:

[7]

(Agricultural Holdings):

14. Declaration I/we hereby apply for planning permission/conse	ent as described in this form	and the accompanying p	lans/drawings and a	additional
information. I/we confirm that, to the best of my, genu apprions of the person(s) giving them.	our knowledge, any facts st	ated are true and accurate	e and any opinions o	given are the
Signe	Or signed - Agent:		ate (DD/MM/YYYY):	1 I
X	NYM / 2013 /		01-04-13	(date cannot be pre-application)
15. Applicant Contact Details	16.	Agent Contact Detai	ils	
Telephone numbers	11	phone numbers		
Country code: National number:	Extension number: Cour	ntry code: National num	nber:	Extension number:
Country sodo	Cour	ntry code: Mobile numb	or (antional):	
Country code: Mobile number (optional):		Mobile numb	ет (орионату.	
Country code: Fax number (optional):	Cour	ntry code: Fax number (optional):	
Email address (optional):		l address (optional):		
triali address (optional):	Cilai	raduress (optionar).		
17 Cita Viale				
17. Site Visit Can the site be seen from a public road, public fo	otpath, bridleway or other p	oublic land? X Yes	No	
If the planning authority needs to make an appoint a site visit, whom should they contact? (Pleas		Agent X Applica	 Other (if d	ifferent from the
If Other has been selected, please provide:		, - <u> </u>	∟ agent/app	olicant's details)
Contact name:	Telep	hone number:		
[
Email address:				
			Nim	,
			JAPO	
			NYNINPA 3 APR 2013	7
		The state of the s		

\$Date: 2012-07-17 #\$ \$Revision: 4636 \$