

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

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

2013/0134

Application for approval of details reserved by condition.

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 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. Applica	ant Name and Address		2. Agent	Name ai	nd Address	
Title:	Mr First name: Ro	ау	Title:	Mr	First name: Richard	
Last name:	Owen		Last name:	Winn		
Company (optional):			Company (optional):			
Unit:	House number:	House suffix:	Unit:		House House suffix:	
House name:			House name:	Old Ba	rn Cottage	
Address 1:	Teydale Farm		Address 1:	Middle Farm		
Address 2:	Whitby Road	NYMNPA	Address 2:	Main S	treet	
Address 3:	Cloughton	-7 MAR 2013	Address 3:	Allerst	on	
Town:	Scarborough		Town:	Pickeri	ng	
County:	North Yorkshire		County:	North '	Yorkshire	
Country:	UK		Country:	UK		
ostcode:	YO13 ODZ		Postcode:	YO18 7	PG	, '

Engantes discussion Engagement (more)	ide the full postal address of the application site.		sistance or prior advice been sought from the local						
Unit:	House House number: suffix:		rity about this application? Yes No						
House name:	Tumber. Sumx.	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this							
Address 1:	Ray Owen Waste Disposal		ation more efficiently). tick if the full contact details are not						
Address 2: Teydale Farm The Falcon Inn			n, and then complete as much as possible:						
Address 3:	Whitby Road		r name:						
Town:	Cloughton	Mrs Hilary Saunders							
County:	Scarborough		Reference:						
Postcode	YO13-0DZ		Date (DD/MM/YYYY):						
(optional): Description	of location or a grid reference.	(must be pre-application submission)							
Easting:	mpleted if postcode is not known): Northing:		s of pre-application advice received?						
Description		Brief informal advice regarding the suitability of the proposal and possible number of units							
	N/A								
5. Descri	otion Of Your Proposal								
Please prov	ide a description of the approved development as show	on the	decision letter, including the application reference number						
and date of decision in the sections below:									
Erection of 3 no. Camping Pods for holiday use together with associated access and landscaping works ancillary to The Falcon Inn, Whitby Road, Cloughton, Cloughton									
Reference number: NYM/2012/0837/FL Date of decision: 07 Feb 2013 (Date must be pre-application									
Please state the condition number(s) to which this application relates:									
1.	8 - precautions to prevent highway deposits	6.							
2.	11 - Retention and protection of trees	7.	NYMNPA						
3. 1	12 - Access material	8.	1 MAR 2013						
4.		9.	1 MARCO						
5.		10.							
Has the dev	elopment already started?	1	Yes No						
	e state when the development started (DD/MM/YYYY):	F	(date must be pre-application						
Has the development been completed? Yes ✓ No									
		vvvvi. [(date must be pre-application						
If Yes please state when the development was completed (DD/MM/YYYY): (uate must be pre-application submission)									
	rge Of Condition								
Please provi	de a full description and/or list of the materials/details th	at are be	ing submitted for approval:						
See attached									
7. Part Discharge Of Condition(s)									
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:									
is 169 piede maicate which part of the condition your application relates to.									
L									

informer in required will result in your application being deemed invited. The Lock Anning Authority has been submitted.	valid. It will not be considered valid until all information required by				
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 the information.					
Signed - Applicant:	Or signed - Agent: Richard G Winn				
Date (DD/MM/YYYY): 01 March 2013 (date cannot be pre-application)					
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): 44 Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: 44 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):				
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or f the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) f Other has been selected, please provide: Contact name:	r other public land?				
Email address:					

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all

8. Planning Application Requirements - Checklist

NAN 2013