

NYM / 2013 / U 6 U U / N M

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

Telephone: 01439 772700 Email: planning@northyorkmoors.org.uk Website: www.northyorkmoors.org.uk

2013/0608

Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

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 Addres
Title: MR First name: PHILLIP	Title: First name
Last name: Newton	Last name:
Company (optional):	Company (optional):
Unit: House number: House suffix:	Unit: House number:
House name: THE WILLOWS	House name:
Address 1: Low NEWBIGGIN NORTH	Address 1:
Address 2: AISLABY	Address 2:
Address 3:	Address 3:
Town: WHITBY	Town: 21A
County: NORTH YORKSHIRE	County:
Country: ENGLAND	Country:
Postcode: YOZI ITQ	Postcode:

Title:	First name:	
Last name:		
Company (optional):		
Unit:	House number:	House suffix:
House name:		
Address 1:		
Address 2:		
Address 3:	NYMIND	
Town:	NYMINPA 21 AUG 2010	
County:		
Country:		
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
Unit: House House suffix:	authority about this application?	Yes No
House name: TUE WILLOWS	If Yes, please complete the following inform you were given. (This will help the authority	
Address 1: Low NEWBIGGIN NORTH	application more efficiently). Please tick if the full contact details are not	
Address 2: 15LABY	known, and then complete as much as poss	sible:
Address 3:	Officer name:	
Town: WHITBY	Reference:	
County: NORTH YORKSHIRE		
Postcode (optional): YOZ/ 1 TQ	Date of advice (DD/MM/YYYY):	
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received:	
Easting: Northing:	1	
Description:	' 	
	J) (
5. Eligibility		
Do you, or the person on whose behalf you are making this applicat	tion — — —	
have an interest in the part of the land to which this amendment re	tion, lates? Yes No	
If you have answered No to this question, you cannot	t apply to make a non-material amend	dment.
•		
If you are not the sole owner, has notification under article 9 of the	DMPO heen given? Yes No	Not Applicable
If you are not the sole owner, has notification under article 9 of the		Not Applicable
If you have answered No to this question, you cannot		
	t apply to make a non-material amend	
If you have answered No to this question, you cannot	t apply to make a non-material amend	
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot lf you have answered Yes to this question, please give details of per	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot five the property of the	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot five the property of the	t apply to make a non-material amend sons notified: Address	dment.
If you have answered No to this question, you cannot if you have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am:	t apply to make a non-material amend	dment.
If you have answered No to this question, you cannot if you have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a memb(ar of staff (b) an elected member	t apply to make a non-material amend sons notified: Address	dment.
If you have answered No to this question, you cannot lifyou have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a memb', er of staff (b) an elected member (c) related to a member of staff	any of these statements apply to you?	dment.
If you have answered No to this question, you cannot lifyou have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a memb/ar of staff (b) an elected member (c) related to a member of staff (d) related to an elected member	any of these statements apply to you?	dment.
If you have answered No to this question, you cannot lifyou have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a memb', er of staff (b) an elected member (c) related to a member of staff	any of these statements apply to you?	dment.
If you have answered No to this question, you cannot lifyou have answered Yes to this question, please give details of per Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a memb/ar of staff (b) an elected member (c) related to a member of staff (d) related to an elected member	any of these statements apply to you?	dment.

7. Description Of Your Proposal				
Please provide a description of the approved development as shown on the decision letter, including application reference number and decision in the sections below. Please also provide the original application type:				
MYM / 2013 / 0 6 0 8 / N M				
Reference number: Date of decision (DD/MM/YYYY):				
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') House holder:				
For the purpose of calculating fees, which of the following best describes the original application type?				
Householder development: development to an existing dwelling-house or development within its curtilage				
Other: anything not covered by the above category				
8. Non-Material Amendment(s) Sought				
Please describe the non-material amendment(s) you are seeking to make:				
Alteration of exesting andow on East elevation to Pation doors. Doors to be of timber construction of an soft wood frame, painted in pastel green to match existing wordows.				
Installation of top hung casement window to West elevation to allow light / ventilation to En-suite. Window				
to be of softwood o painted in pastel green to match existing. Height to be approx 1.8m from finished sloor level internally or have obscure glass.				
Are you intending to substitute amended plans or drawings?				
If Yes, please complete the following:				
Old plan/drawing number(s):				
21 MINPA				
New plan/drawing number(s):				
Please state why you wish to make this amendment:				
After an over sight on our original application de above works have been completent. As due has non				
come to light retrospective permission is non being sought.				

9. 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 not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form:				
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:				
The correct fee:				
10. Declaration				
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.				
Signed - Applieant) Or signed - Agent:	Date (DD/MM/YYY):			
	20/08/2013			
11. Applicant Contact Details	12. 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):			
	Errail address (optional).			
13. Site Visit				
Can the site be seen from a public road, public footpath, bridleway o	r other public land? Yes No			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>)	Agent Applicant Other (if different from the agent/applicant's details)			
If Other has been selected, please provide:	·			
Contact name:	Telephone number:			
Email address:				

· 報報// 2013 / 声 6 0 3 7 河州

