

The Old Vicarage

8 Bondgate

Helmsley

York

YO62 58P

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

North York Moors National Park Authority

2014/16

£195 \$12665

Application for a non-material amendment following a grant of planning permission.

Town and Country Planning Act 1990

NYMNPA 10 JAN 2014

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			
Title:	MR First name: RODNEY	Title	
Last name:	HODGSON	Last	
Company (optional):		Com (opt	
Unit:	House House suffix:	Unit	
House name:	HILLSIDE FARM HOUSE	Hou:	
Address 1:	ESKDALESIDE	Addı	
Address 2:	SLEIGHTS	Addr	
Address 3:		Addı	
Town:	WHITBY	Tow	
County:	NORTH YORKSHIRE	Cour	
Country:		Cour	
Postcode:	4022 5ES	Posto	

2. Agent Name and Address				
Title:	First name:			
Last name:				
Company (optional):				
Unit:	House number: House suffix:			
House name:				
Address 1:				
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:),			

Please provide the full postal address of the application site.	4. Pre-application Advice						
Lloves I Italia	Has assistance or prior advice been sought authority about this application?	from the local Yes No					
onit: number: suffix:							
name: METHODIST SCHOOL HALL	If Yes, please complete the following inform you were given. (This will help the authority	nation about the advice y to deal with this					
Address 1: INGS TERRACE	application more efficiently). Please tick if the full contact details are not	•					
Address 2: GROSMONT	known, and then complete as much as pos						
Address 3:	Officer name:						
Town: WHITBY	MR PETER JONES Reference:						
County: NORTH YORKSIRE	Reference:	S / N M					
Postcode (optional): 4022 5 PF	Date of advice (DD/MM/YYYY):	7"H \ 2014					
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received:	7" JAN 2014					
Easting: 482995 Northing: 505295	DISCUSSED PLAN'S AS SUB	MITTED, RECIEVED					
Description:	ADVICE ON WHAT WOULD BE TO IMPROVE DISABLED ACCESS	E ACCEPTABLE AND					
	ACCOMADATION						
5. Eligibility							
Do you, or the person on whose behalf you are making this application have an interest in the part of the land to which this amendment relationship.	on, toc? Yes No						
;	tes:						
If you have answered No to this question, you cannot a		dment.					
If you are not the sole owner, has notification under article 9 of the DM	MPO been given? Yes No	Not Applicable					
If you have answered No to this question, you cannot a	If you have answered No to this question, you cannot apply to make a non-material amendment.						
	ibbih to make a non-matema ameni	dment.					
If you have answered Yes to this question, please give details of perso		dment.					
	ns notified:	Date of Notification					
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso	ns notified:						
If you have answered Yes to this question, please give details of perso Person Notified	ns notified:						
If you have answered Yes to this question, please give details of perso Person Notified 6. Authority Employee / Member	Address	Date of Notification					
Person Notified Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff	Address	Date of Notification					
Person Notified Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff	Address						
Ferson Notified Person Notified Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member	Address	Date of Notification					
Person Notified Person Notified Person Notified Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff	Address	Date of Notification					
Ferson Notified Person Notified 6. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member	Address	Date of Notification					

7. Description Of Your Proposal					
Please provide a description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below. Please also provide the original application type:					
Conversion of METHODIST CHAPER AND SUNDAY SCHOOL HOUSE INTO 4 HOLIDAY UNITS.					
NYM / 2014 / 11 0 1 6 / NEM					
Reference number: Date of decision (DD/MM/YYYY):					
Nym 2011 02.75 FL 03/08/2011					
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')					
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:					
ERECTION OF PORCH AREA, WHICH WOULD ALLOW ENTRY INTO THE PROPERTY					
VIA AN EXISTING WINDOW. THIS WINDOW OPENING WOULD BE ALTERED					
TO ALLOW PATIO DOORS TO BE FITTED. THIS WOULD ALLOW GREATER AREA					
IN THE DISMBLED EN-SUITE, BETTER ACCESS INTO THE GROUND FLOOR BEDROOM AND INCREASE BE SPACE FOR WHEELCHAIR TURNING CIRCLES.					
AND INCREASE THE SPACE FOR WHEELCHAIR TORNING CIRCLES.					
NYMARC					
10 JAN 2014					
Are you intending to substitute amended plans or drawings?					
If Yes, please complete the following:					
Old plan/drawing number(s): ABDITION & AMOUNDMENTS TO					
27, 30					
New plan/drawing number(s):					
27 (GROUND FLOOR RAN) 30A (SOUTH ELEVATION) & 30B (EAST ELEVATION)					
Please state why you wish to make this amendment:					
ADDITIONAL PLANS TO AMEN'S PLANS 27, 30 TO SHOW PROPOSED PLAN					
AND EZEVATIONS OF PORCH					

	-			
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	" MYM / 2014 / B O 1 G / N M			
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:				
The correct fee: £195				
10. Declaration I/we hereby apply for planning permission/consent as described in ti Information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Or signed - Agent:	y facts stated are true and accurate and any opinions given are the			
11. Applicant Contact Details 12. Agent Contact Details				
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Extension number: Country code: Mobile number (optional): Email address (optional):			
Can the site be seen from a public road, public footpath, bridleway or if the planning authority needs to make an appointment to carry but a site visit, whom should they contact? (Please select only one) of Other has been selected, please provide: Contact name:	other public land? Yes No Applicant Other (if different from the agent/applicant's details) Telephone number:			
Email address	· · · · · · · · · · · · · · · · · · ·			

10-JAN 2014