NYM-1-2014 / U 3 8 3 / E 1- 12955 5/6/14



20140383

Bondgate Helmstoy York YOS2 SBP

Telephone: 61439 770657 Email: do@northyorkmoors.upa.gov.uk Website: www.moors.uk.net

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

## Publication of planning applications on council websites

First name: COLIN

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.

Title:

Last name:

2. Agent Name and Address

First name:

MATTHEW

ERIC

Please complete using block capitals and black ink.

BAINBRIDGE

Applicant Name and Address

Title:

Last name:

Company [

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Unit: House number; suffix: House number: suffix: LHUSLEY UNEW.  Address 2: SLETGUTS  Address 3: Town: LHITOY  County: LAWTH YORKSULED: County: LOUTTHY  Postcode: YO22 SEY  3. Description of Proposed Works  Please describe the proposed works:  SINGLE STORM RETARL EXTENSION  NYMNPA  5:JUN 2014	(optional):			(optional):	TOOK DENON
name: Flots IN MEDD LAWG  Address 1: FLOSON MEDD LAWG  Address 2: SLETGUTS  Address 3: CUNDERMILL  County: WINTOM YORKSULLES  County: WORTH YORKSULLES  County: WORTH YORKSULLES  Country: BUCLIAND  Postcode: YOU ZEF  3. Description of Proposed Works  Please describe the proposed works:  SINGLE STORM REPD LAWG	ŧ '	House House suffix:		Unit:	House number: House suffix:
Address 2: SLETGUTS  Address 3: Address 3: Town: LAHITAM  County: LAMA YORKSUME  Country: LAGUAND  Postcode: YOZI S EX  Postcode: YOZI S EX  SINGLE STORM RETALEMENTO		HOBBIN HEDD			VALLEY VIMO
Address 3:  Town: LAMITOM  County: LAMITOM  Country: LANGUARD  Postcode: YOZZ 5 EV  Country: Postcode: YOZZ 5 EV  RESPECTIVE TOWN: LANGUARD  Postcode: YOZZ 5 EV  RESPECTIVE TOWN: LANGUARD  Postcode: YOZZ 2 FF  SINGLE STORM RESPECTIVENSION	Address 1:	HOBDIN HEAD LANG		Address 1:	CNDERMIL
Town: LAHITAM  County: LAMINA YORKSUIRE  Country: LANGLAND  Postcode: YOZZ 5 ISY  RESTR. EXTENSION  Town: LOUVTRY  County: NORTH YORKSUIRE  Country: BNGLAND  Postcode: YOZZ 2 PF  3. Description of Proposed Works  Please describe the proposed works:	Address 2:	SLETGUTS		Address 2:	GLAISDALB
County: WMM YONKSUIRE  Country: WOLAND  Postcode: YO21 5 EY  Rescription of Proposed Works  Please describe the proposed works:  SINGLE STORM RETAR EXTENSION	Address 3:			Address 3:	
Country: LNGLAND  Postcode: YOZL S EX  Rescription of Proposed Works  Please describe the proposed works:  SINGLE STORM RETAR EXTENSION	Towni	WHITOY		Town:	LUMITAY
Postcode: YOZI 5 EV  Postcode: YOZI 2 PF  3. Description of Proposed Works  Please describe the proposed works:  SINGLE STORM RETAINED  Postcode: YOZI 2 PF  Postcode: YOZI 2 PF	County:	WORTH YONKSUINE	103776.07244234	County:	NORTH YORKSHIRE
3. Description of Proposed Works  Please describe the proposed works:  SINGLE STORM REAR EXTENSION	Country:	ENGLAND		Country:	RNGTHAN
Please describe the proposed works:  SINGLE STURM RETAR EXTENSION	Postcode:	Y021 5 EY	<u> </u>	Postcode:	Y021 2PF
SINGLE STORM REAR EXTENSION	3. Dosari	ption of Proposed Works			
	Please descr	ibe the proposed works:			
NYMNPA 5 JUN 2014	s	INGLE STORM REAR BY	TENSIO	J	
5 JUN 2014					NYMNPA
					5 JUN 2016
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3. Description of Proposed Works (continued)	
Has the work already been started without planning permission?	Yes No
If Yes, please state when the works were started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed without planning permission?	Yes No
If Yes, please state when the works were 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.	is a new or altered vehicle access proposed to or from the public highway? Yes No
Unit: House House suffix:	is a new or altered pedestrian access
House Hobbin HEAD	proposed to or from the public highway? Yes No  Do the proposals require any diversions,
Address 1: MOBBIN NEBD LAWS	extinguishments and/or creation of public
Address 2:	rights of way? Yes Mo
	drawings and state the reference number(s) of the plan(s)/ drawing(s):
C B B B B B B B B B B B B B B B B B B B	
Town: WITTOY	
County: NMTU YORKSHIRE	
Postcode (optional): Yo22 5 EX	
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:  Reference:  Date (DD MM YYYY): (must be pre-application submission)  Advice given:	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your boundary? Yes No 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? Yes No If Yes, please show on your plans, indicating the scale, which trees by giving them numbers e.g. T1, T2 etc. and state the reference number of any plans or drawings:
8. Parking Will the proposed works affect existing car parking arrangements? Yes No	9. Council Employee / Member Is the applicant or agent related to any member of staff or elected member of the Council?  Yes No
If Yes, please describe:	If Yes, please provide details:

Wells  STONE & RENDER  STONE & PENDER  RUBBIN OR FIBRE GLASS  COTATING  TIMBER  TIMBER  Doors  Defice access and hard-standing  Ughting  Dithers (please specify)		Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable
Windows  TIMBER  TIMBE	Walls	STONE & DENDUR	stone d Renobe			
Windows  Doors  Doors  Doundary treatments e.g. fences, walls)  /ehicle access and lard-standing  Jehting  Dothers	Roof	RUBBUR COATING	RUBBER OR FIBREGLASS COATING			
Soundary treatments e.g. fences, walls)  /ehicle access and nard-standing.	Vindows	TIMBGR	TIMBER			
(e.g. fences, walls)  Wehicle access and hard-standing  Lighting  Dithers	Doors	the time state.		Q⁄		
Lighting  Dithers				ġ⁄	<u>'</u>	
Others P1				Ø		
	.ighting		B JUN 2014	W		annum akan perpennya menengka perker
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2. Planning Application Re	make tu	ents - Checklist re you have sent all the information in suppo tion being deemed invalid, it will not be cor	ort of your proposal. Failure to submit all	vd b
he Local Planning Authority has been copies of a completed nd dated application form:	on submit	ted.  3 copies of a design and access statement where proposed works fall within one of the	The correct fee:  3 copies of the completed, dated Article	2
copies of a plan which identifies he land to which the application elates drawn to an identified scale nd showing the direction of North: copies of other plans and drawing:		following designated areas:  National Park Site of special scientific interest Conservation area Area of outstanding natural beauty	7 Certificate (Agricultural Holdings): 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable):	ء
r information necessary to describe he subject of the application:		World Heritage Site     The Broads		
3. Declaration we hereby apply for planning pern oformation.	ilssion/co	nsent as described in this form and the accor	npanying plans/drawings and additional	
Signed - Applicant:		Or signed - Agent:	Date (OD/MM/YYYY):	

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14. Applicant Contact Details	15. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number.  Country code: Mobile number (optional):	ion
Country code: Fax number (optional):  Email address (optional):	Country code: Fax number (optional):  Email address (optional):
	Principle Annies Schridigit
The Site Visit  Can the site be seen from a public road, public footpath, bridlewell 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:  Contact name:  M2. Colin Danishes t	
12. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all information required will result in your application being deemed the Local Planning Authority has been submitted. The correct fee: The completed and dated application form  A plan which identifies The completed, date is and showing the direction of the land to which the application relates drawn to an identified scale and showing the direction of control.	The original and 3 copies of the following documents:  A design and access  statement where proposed

