

2014/0406

WYW , North York Moors National Park Afithority The Old Vicarage Bondgate York

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

Application for Planning Permission. Town and Country Planning Act 1990

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.

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.

T. Applica	ant Name and Address	2. Agent Name and Address					
Title:	First name:	Title: Mr First name: Jonathan					
Last name:		Last name: Moore Lambe					
Company (optional):	Normanhurst Enterprises Ltd	Company (optional): Lambe Planning & Design Ltd					
Unit:	House House suffix:	Unit: House House suffix:					
House name:		House name:					
Address 1:	9 Burscough Street	Address 1: Galeri	7				
Address 2:	Ormskirk	Address 2: Victoria Dock					
Address 3:		Address 3: Caernarfon	Ī				
Town:	Lancashire / / / / / / / / / / / / / / / / / / /	Town: Gwynedd					
County:		County:	\exists				
Country:		Country:	Ī				
Postcode:	L39 2EG	Postcode: LL55 1SQ					
As the building, work or change of use already started? Yes, please state the date when building, work or use were started (DD/MM/YYYY): (date must be pre-application submission)							
f Yes, please s	g, work or change of use been completed? tate the date when the building, work se was completed: (DD/MM/YYYY):	Yes X No (date must be pre-application submission) State: 2013-01-07 #5 SRevision: 4679 \$					

I/I Y I	<u> </u>				
4. Site Add	lress Details	<i>.</i>	,)	5. Pre-application Advice	`
Please provid	e the full postal address of the	application s	ite.	Has assistance or prior advice been sought fr	_{
Unit:	House number:	House suffix:		authority about this application?	X Yes
House name:				if Yes, please complete the following information you were given. (This will help the authority	
Address 1:	Whitby Holiday Park			application more efficiently).	to deal mer ans
Address 2:	Whitby			Please tick if the full contact details are not known, and then complete as much as possi	ble:
Address 3:				Officer name:	
Town:				Mrs Hilary Sauders	
County:	North Yorkshire			Reference:	
Postcode (optional):	YO22 4JX		J ,	emails of 22nd April 2014 and 1st	: May 2014 refers
Description of	of location or a grid reference. In pleted if postcode is not know	m)·		Date (DD/MM/YYYY): (must be pre-application submission)	1st May 2014
Easting:	Northing			Details of pre-application advice received?	
Description:					
<u> </u>	lalida David			To submit a planning application	1
	loliday Park				
6. Pedestria	an and Vehicle Access, Roa	ds and Righ	ts of Way	7. Waste Storage and Collection	
	ered vehicle access proposed public highway?	Yes	X No	Do the plans incorporate areas to store and aid the collection of waste?	Yes X No
	ered pedestrian		لثث	If Yes, please provide details:	190 (25)
access propo the public hig	sed to or from Jhway?	Yes	X No		
Are there any provided with	new public roads to be nin the site?	Yes	X No	N/A	
Are there any			ريت .		
	to be provided acent to the site?	Yes	X No		
Do the propo /extinguishm	sals require any diversions ents and/or		Tarel	Have arrangements been made for the separate storage and	
creation of rig	ghts of way?	Yes	X No	collection of recyclable waste?	Yes X No
details on yo	red Yes to any of the above qu ur plans/drawings and state th	estions, pleas le reference d	se show of the plan	If Yes, please provide details:	
(s)/drawings	(s)				
				N/A	
	ty Employee / Member to the Authority, I am: (a) a m	ember of stat	ff	Qo any of these statements apply to you?	Yes X No
J	(b) an e	elected mem	ber	, , , , , , , , , , , , , , , , , , , ,	
	• •	ted to a men ited to an ele		er	
If Yes, please	provide details of the name, r				

If applicable, please sta	te what mater	ials are to be used extern	nally. Include	e type, colour and name for e	each material:	1 4	г
	Existing (where applic	cable)		Proposed		Not applicable	Don't Know
Walls						X	
Roof						X	
Windows						X	
Doors						X	
Boundary treatments (e.g. fences, walls)	1			ļ		X	
Vehicle access and hard-standing		MARIONA 19, NO.		Tarmac & Tegula Drive Setts			
Lighting				Low energy bulkhead Toilet Disposal Point Disposal Point			
Others (please specify)				Sandstone wall for To Disposal Point	oilet / Chemical	X	
Are you supplying addi	tional informa	 ation on submitted plan(:	s)/drawing(s	ı)/design and access stateme	nt? XYes		No
f Yes, please state refer	ences for the	plan(s)/drawing(s)/desig	n and access	s statement:			
 Site Plan MF Location Pla Design and 	in LP	itement					
0. Vehicle Parking	q				4		
-	=	existing and proposed n	number of or	n-site parking spaces:			
Type of Vehicle		Total Existing	Total	proposed (including spaces retained)	Difference in spaces	!	
Cars		·					
Light goods vehicles/ public carrier vehicles				N/A			
Motorcycles							
Disability space	es						
Cycle spaces							
Other (e.g. Bus	s)						

9. Materials

Other (e.g. Bus)

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes X No
X Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? X Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes X No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes X No
	How will surface water be disposed of?
Connection to be to existing independent Treatment Plant - all as existing - please see	Sustainable drainage system Existing watercourse
Drg. No MH1.1	X Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
,	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	existing holiday park
they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved	Is the site currently vacant? Yes X No
and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development X No	When did this use end (if known)? DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate)
Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development X No	Land which is known to be contaminated? Yes X No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes X No
Yes, on the development site Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable
X No	to the presence of contamination? Yes X No
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes X No	Does the proposal involve the need to dispose of trade effluents or waste? Yes X No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste.
of the local landscape character? Yes X No	
If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a	
Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning	
authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to	
design, demolition and construction - Recommendations'.	(

	Proposed Housing						Existing Housing								
Market Housing	Not known	1	Num 2	ber o	f Bed 4+	rooms Unknowi	Tota	Market Housing	Not known	1 1	Num 2	ber o	f Bed 4+	rooms Unknowr	Tota
Houses		İ		-	1	DIMIONI	1	Houses		1	1 -	3	4+	OTIKHOWI	
Flats and maisonette	s 🗆		1			 		Flats and maisonettes					-	1	-
Live-work units				-				Live-work units		 	1	_	-	-	-
Cluster flats								Cluster flats			-	\vdash	╁─		-
Sheltered housing			1					Sheltered housing			 	 	-		
Bedsit/studios								Bedsit/studios		<u> </u>				-	
Unknown type								Unknown type	$\frac{1}{1}$	 		 -		 -	1
	T	otals	(a+l) + c +	·d+e	c + f + g = 0		, , , , , , , , , , , , , , , , , , , ,		otals	(a+b)	1+ ^ 4	.d+e	r + f + q = 0	1-
			•			, , , , , , , , , , , , , , , , , , ,	1		•	O tui.	, ta i c	,,,,,	uit	. 1719/	Į
Social Rented	Not		Num	ber o	Bedi	rooms	Total	Social Bouts d	Not	T	Num	ber of	f Bedi	rooms	Tota
	known	1_	2	3	4+	Unknowr	1	Social Rented	known	1	2	3	4+		
Houses	<u> </u>		_	ļ .	ļ		<u> </u>	Houses			ļ				
Flats and maisonettes	 		1					Flats and maisonettes			<u> </u>				
Live-work units			<i> </i>		M	1		Live-work units					<u> </u>		
Cluster flats			/	Ĭ	9.	,	<u> </u>	Cluster flats			ļ				
Sheltered housing		/	1			1 2 4	<u> </u>	Sheltered housing				<u></u>			
Bedsit/studios		4					ļ	Bedsit/studios							
Unknown type						No.		Unknown type			<u> </u>				
	To	otals	(a + b) + c +	d + e	+f+g)=	$\leq J$		T	otals	(a + b	+ c +	d+e	(+f+g)=	
<u> </u>	T		NI		n - Ju		Total		1						T
Intermediate	Not known	1	2	3	$\overline{}$	ooms Unknown	1	Intermediate	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Total
Houses								Houses					<u> </u>		1
Flats and maisonettes								Flats and maisonettes							
Live-work units				_				Live-work units			1 -				
Cluster flats								Cluster flats		•					
Sheltered housing								Sheltered housing			1				
Bedsit/studios				_				Bedsit/studios			<u> </u>				
Unknown type								Unknown type							
	To	tals	(a + b	+ c +	d+e	+f+g)=			To	otals	(a + b	+ < +	d+e	+f+g)=	
							<u>. </u>		·					<u> </u>	1
Key worker	Not known		Numb				Total	Key worker	Not	-	Numb				Total
Houses		1	2	3_	4+	Unknown		Houses	known	1_	2	_3_	4+	Unknown	
Flats and maisonettes								Flats and maisonettes			<u> </u>				
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								·			<u> </u>				
Bedsit/studios								Sheltered housing Bedsit/studios							<u> </u>
Unknown type								 				-			-
опкночи суре		tala	(a 1 h	101	d.1 ~	+f+g)=		Unknown type		. 4 - 1	<u> </u>		•		
	10	(415	(u + 0	+6+	u+e	+i+gi=		<u> </u>	To	otais	(a + b	+ (+	d+e	+f+g)=	
		al ur		(A + i											-

NYM . 2014 / 0 4 0 6 6 F L 18. All Types of Development: Non-residential Floorspace Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes If you have answered Yes to the question above please add details in the following table: Net additional gross **Existing gross** Gross Internal floorspace Total gross internal to be lost by change of floorspace proposed internal floorspace internal Use class/type of use floorspace use or demolition (including change of following development use)(square metres) (square metres) (square metres) (square metres) **A1** Shops Net tradable area: Financial and A2 professional services А3 Restaurants and cafes A4 Drinking establishments **A5** Hot food takeaways B1 (a) Office (other than A2) Research and B1 (b) development B1 (c) Light industrial **B2** General industrial 88 Storage or distribution Hotels and halls of C1 <u>residence</u> C2 Residential institutions Non-residential D1 institutions D2 Assembly and leisure **OTHER** Please Specify Total in addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Existing rooms to be lost by change Total rooms proposed (including Not Use Net additional rooms Type of use of use or demolition changes of use) applicable class C1 Hotels Residential C2 Institutions OTHER Please Specify 19. Employment Please complete the following information regarding employees: Total full-time Part-time Full-time <u>equivalent</u> Existing employees N/A all as existing Proposed employees 20. Hours of Opening Please state the hours of opening for each non-residential use proposed: Sunday and Monday to Friday Saturday Not known Use Bank Hólidays N/A all as existing 21. Site Area

0.02 Ha

Please state the site area in hectares (ha)

<u> </u>		<u>NYM</u>	12014 /	0/06/6				
22. Industrial or Commercial Proce		lachinery	754 See					
Pleas (scribe the activities and processes be carried out on the site and the end produplant, ventilation or air conditioning. Please type of machinery which may be installed or	icts including include the	N/A Holiday	N/A Holiday Park					
is the proposal a waste management develo	pment?	Yes X No						
If the answer is Yes, please complete the foll	owing table:		·					
	includ	total capacity of the void in ing engineering surcharge vance for cover or restorationes if solid waste or litres if	and making no on material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)				
Inert landfill								
Non-hazardous landfill								
Hazardous landfill								
Energy from waste incineration								
Other incineration								
Landfill gas generation plant								
Pyrolysis/gasification								
Metal recycling site								
Transfer stations								
Material recovery/recycling facilities (MRFs)		A						
Household civic amenity sites		1. PA						
Open windrow composting		1 2722	7	4,41				
In-vessel composting		See of						
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment								
Recycling facilities construction, demolition and excavation waste								
Storage of waste								
Other waste management								
Other developments								
Please provide the maximum annual operati	ional through	put of the following waste	streams:					
Municipal								
Construction, demolition and e								
Commercial and industr	'ial							
Hazardous	المالية	1 1 6		4				
If this is a landfill application you will need to planning authority should make clear what i	o provide furti information it	ner information before you requires on its website,	ar application can	be determined. Your waste				
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities stat		Yes X No	Not applicab	ble				
If Yes, please provide the amount of each sul	bstance that i	s involved:						
Acrylonitrile (tonnes)	Ethylene	oxide (tonnes)		Phosgene (tonnes)				
Ammonia (tonnes)	Hydrogen cy	anide (tonnes)	Sulp	ohur dioxide (tonnes)				
Bromine (tonnes)	Liquid ox	kygen (tonnes)]	Flour (tonnes)				
Chlorine (tonnes) Lic	quid petroleur	m gas (tonnes)	Refined	white sugar (tonnes)				
Other:		Other:						
Amount (tonnes):		Amount (ton	nest:					

26. 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 completed and dated application form:

X

The correct fee:

X

The original and 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:

X

The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:

The original and 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):

X

The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):

X

NYM · 2014 / 9 4 9 6 6 F & 3 '	•
27. Declaration I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any	his form and the accompanying plans/drawings and additional refacts stated are true and accurate and any opinions given are age age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age. In a companying plans/drawings and additional process opinions given are age.
28. Applicant Contact Details	29. 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: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
30. Site Visit	1
Can the site be seen from a public road, public footpath, bridleway o	r other public land? Yes X 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>) If Other has been selected, please provide:	X Agent Applicant Other (if different from the agent/applicant's details)
Contact name:	Telephone number:
Fmail addross:	

