

NYM / 2014 / n 6 2 6 1 F L

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

2014/0626

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

Householder Application for Planning Permission for works or extension to a dwelling.

Town and Country Planning Act 1990

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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

£23 # 13308

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 Address			
Title: MRS First name: MARI	Title: First name:			
Last name: PALMER	Last name:			
Company ST MEDDA'S RC PRIMARY	Company (optional):			
Unit: House number: House suffix:	Unit: House number: House suffix:			
House name:	House name:			
Address 1: EGTON BRIDGE	Address 1:			
Address 2: W	Address 2:			
Address 3:	Address 3:			
Town: WMITBY	Town:			
County: NORTH YORKSMIRT	County:			
Country:	Country:			
Postcode: 4021 11X	Postcode:			
3. Description of Proposed Works				
Please describe the proposed works:				
WE WOULD LIKE TO REPLACE OUR STOLEN LEAD ROOF WITH SLATE.				
THE LEAD WAS BEEN STOLEN TH	IREE TIMES IN THE LAST 4 YEARS.			
THIS IS ONLY A SMALL PART OF OUR ROOF AT THE FRONT OF OUR				
BUILDING.	() ()			
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	r II			

3. Description of Proposed Works (continued)	1004 (2011) 0 6 2 5 / E I
Has the v already started? Yes No	NYM / 2014 / 0 6 2 6 / F L
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)
Has the work already been completed?	
If Yes, please state when the work was 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
Unit: House House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access
House name: AS PLEVIOUS	proposed to or from the public highway? Yes No
Address 1:	Do the proposals require any diversions, extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/drawing(s):
Town:	
County:	
Postcode (optional):	
Has assistance or prior advice been sought from the local authority about this application? Yes No 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: PETER JONES Reference: Date (DD MM YYYY): must be pre-application submission) Details of the pre-application advice received: THE ADVICE WAS RECEIVED ON THE ADVICE IN MARCH. WE WERE ADVISED THAT SLATE OR ARTIFICIAL LEMO WOOLD BE ACCEPTABLE	Are there any trees or hedges on your own property or on adjoining properties which are within falling distance of your proposed development? 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? If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale.
Will the proposed works affect existing car parking arrangements? Yes No f Yes, please describe:	9. 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 If Yes, please provide details of the name, relationship and role

10. Materials	ata what materials are to be used ev	NYM / 2014 / D 6 2 6 / F L xternally. Include type, colour and name for each material:		
II applica piease sic	Existing (where applicable)	Proposed	Not applicable	Don'i
Walls	Y		8	
Roof	LEAD	SLATE		
Windows			Ø	
Doors			Ø	
Boundary treatments (e.g. fences, walls)			Ø	
Vehicle access and hard-standing		10	₫	
Lighting		1. 9 8 SEP 2014	Ø	
Others (please specify)			d	
		an(s)/drawing(s)/design and access statement? Yes	; Z	/ No
Yes, please state refere	nces for the plan(s)/drawing(s)/des	sign and access statement:		
		# 		

12. Agricultural Land Declaration	n	
Town and Country Planning (Dev	AGRICULTURAL LAND DECLARATION elopment Management Procedure) (England) Order 2010 Certificat tural Land Declaration - You Must Complete Either A or B	e under Article 12
(A) None of the land to which the applic	ation relates is, or is part of, an agricultural holding.	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
(B) I have/ The applicant has given the rebefore the date of this application, was a slisted below:	quisite notice to every person other than myself/ the applicant who, on tenant of an agricultural holding on all or part of the land to which this	the day 21 days application relates,
Name of Tenant	Address	Date Notice Served
	1/150	
	08 SEP 2014	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY)
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1.0		
nformation required will result in your ap he Local Planning Authority has been sul he original and 3 copies of a	e sure you have sent all the information in support of your proposal. Fa olication being deemed invalid. It will not be considered valid until all in mitted. The original and 3 copies of a The correct fee:	ilure to submit all nformation required by
ompleted and dated application form: he original and 3 copies of a plan which dentifies the land to which the applicatio elates drawn to an identified scale nd showing the direction of North:	design and access statement if proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building: The original and 3 completed, dated O Certificate (A, B, C or Certificate (A, B, C)))	wnership
he original and 3 copies of other plans nd drawings or information necessary to escribe the subject of the application:	The original and 3 completed, dated A (Agricultural Holding	rticle 12 Certificate
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14. Declaration	YM / 2014 / n 6 2 6 / F L			
I/we hereby apply for planning permission/consent as described in informati //we confirm that, to the best of my/our knowledge, a genuine opinions of the person(s) giving them.	n this form and the accompanying plans/drawings and additional any facts stated are true and accurate and any opinions given are the			
Signed - Applicant: Or signed - Age	nt: Date (DD/MM/YYYY):			
	21/07/2014 (date cannot be pre-application)			
15. Applicant Contact Details	16. 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):			
17. Site Visit				
Can the site be seen from a public road, public footpath, bridleway or other public land?				
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)			
If Other has been selected, please provide:				
Contact name:	Telephone number:			
Email address:				

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