



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

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2011/0693

Application for listed building consent for alterations, extension or demolition of a listed building.
Planning (Listed Buildings and Conservation Areas Act) 1990

LB exempt

Publication of planning applications on council websites

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.

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:	MR	First name:	MIKE
Last name:	THOMAS	Last name:	
Company (optional):		Company (optional):	
Unit:		Unit:	
House number:		House number:	
House suffix:		House suffix:	
House name:	BAY NKS FARM	House name:	
Address 1:	ROBIN MOORS	Address 1:	
Address 2:	BAY	Address 2:	
Address 3:		Address 3:	
Town:	WHITBY	Town:	
County:	N. YORKS	County:	
Country:	ENGLAND	Country:	
Postcode:	YO22 4PJ	Postcode:	

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13 OCT 2011

3. Description of Proposed Works

Please describe the proposals to alter, extend or demolish the listed building(s):

OPENING UP OF A SEALED EXTERNAL DOORWAY

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3. Description of Proposed Works (continued)

as the work already started without consent? Yes No

If Yes, please state when the work was started (DD/MM/YYYY):

[]

(date must be pre-application submission)

Has the work been completed without consent? Yes No

If Yes, please state the date when the work was completed (DD/MM/YYYY):

[]

(date must be pre-application submission)

4. Site Address Details

Please provide the full postal address of the application site.

Unit: [] House number: [] House suffix: []

House name: BRAYNESS FARM

Address 1: ROBIN HOODS BAY

Address 2: []

Address 3: []

Town: []

County: N. YORKS

Postcode (optional): YO2667

Description of location or a grid reference. (must be completed if postcode is not known):

Easting: [] Northing: []

Description:

FARM SITE ON NORTH OF EXISTING HOUSING LOT 2050

5. Related Proposals

Are there any current applications, previous proposals or demolitions for the site? Yes No

If Yes please describe and include the planning application reference number(s), if known:

Description	Reference number
<u>DISCUSSIONS AND ON GOING REPAIRS</u>	

6. Pre-application Advice

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 as possible:

Officer name: []

Reference: []

Date (DD/MM/YYYY): 29/9/11
(must be pre-application submission)

Details of pre-application advice received?

TOLD UNLIKELY TO OBJECT BUT WOULD NEED TO DO LIMITED CONSENT

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? Yes No

If Yes please provide details:

[]

8. 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 provide details:

[]

SDates: 2007/05/11 09:53:51 \$ SR:revision.1.16 \$

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9. Materials

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Roof covering			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chimney			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windows			<input checked="" type="checkbox"/>	<input type="checkbox"/>
External doors	NONE	would to match existing	<input type="checkbox"/>	<input type="checkbox"/>
Ceilings			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal walls			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Floors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal doors			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Rainwater goods			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard standing			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others (add description)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

Are you supplying additional information on submitted drawings or plans? Yes No

If Yes, please state plan(s)/drawing(s) references:

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10. Demolition

Does the proposal include the partial or total demolition of a listed building? Yes No

If Yes, which of the following does the proposal involve?

- a) Total demolition of the listed building: Yes No
- b) Demolition of a building within the curtilage of the listed building: Yes No
- c) Demolition of a part of the listed building: Yes No

If the answer to c) is Yes:

i) What is the total volume of the listed building?(cubic metres)	
ii) What is the volume of the part to be demolished?(cubic metres)	
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	

Please provide a brief description of the building or part of the building you are proposing to demolish:

Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?

11. Listed Building Alterations

Do the proposed works include alterations to a listed building? Yes No

If Yes, do the proposed works include: (you must answer each of the questions)

- a) Works to the interior of the building? Yes No
- b) Works to the exterior of the building? Yes No
- c) Works to any structure or object fixed to the property (or buildings within its curtilage internally or externally)? Yes No
- d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No

If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):

12. Listed Building Grading

Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)

- Grade I Ecclesiastical Grade II
- Grade II Ecclesiastical Grade II*
- Grade II* Don't know
- Ecclesiastical Grade I

13. Immunity From Listing

Has a Certificate of Immunity from Listing been sought in respect of this building?

- Yes No Don't know

If Yes, please provide the result of the application:

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14. Certificates (continued)

CERTIFICATE OF OWNERSHIP - CERTIFICATE D

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990

certify/ The applicant certifies that:

- Certificate A cannot be issued for this application
- All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so.

The steps taken were:

Notice of the application has been published in the following newspaper (circulating in the area where the land is situated):

On the following date (which must not be earlier than 21 days before the date of the application):

Signed - Applicant:

Or signed - Agent:

Date DD/MM/YYYY:

15. 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.

- | | | | |
|--|-------------------------------------|---|-------------------------------------|
| 3 copies of a completed and dated application form: | <input checked="" type="checkbox"/> | 3 copies of other plans and drawings or information necessary to describe the subject of the application: | <input checked="" type="checkbox"/> |
| 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | <input checked="" type="checkbox"/> | 3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable): | <input checked="" type="checkbox"/> |

16. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

30/9/11

(date cannot be pre-application)

17. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	

Email address (optional):

18. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	

Email address (optional):

19. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No

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:

MIKE TILMAN

Telephone number:

Email address:

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