



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

NYM / 2012 / 0015 / FL 1

2012/0015

Telephone: 01439 770657
 Email: dc@northyorkmoors-npa.gov.uk
 Website: www.moors.uk.net

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

£150 #11302
 9/1/12

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

Title: First name:

Last name:

Company (optional):

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

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:

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3. Description of Proposed Works

Please describe the proposed works:

PROPOSED SITING OF DOMESTIC OUTBUILDING AT ORCHARD COTTAGE EGTON BRIDGE TO INCORPORATE GARDEN STORAGE AREA - POTTING SHED AREA FRONTAGE SUMMER HOUSE SITTING AREA AND GARDEN TOILET.

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):

N/A

(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):

N/A

(date must be pre-application submission)

Site Address Details

Please provide the full postal address of the application site.

Plot: House number: House suffix:

House name: ORCHARD COTTAGE GARDEN

Address 1:

Address 2:

Address 3:

Town: KEGTON BRIDGE WHITBY

County: NORTH YORKSHIRE

Postcode (optional): YO21 1XE

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

Easting: Northing:

Description:

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5. 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:

HILARY SAUNDERS

Reference:

NYM / ENQ / 06887

Date (DD/MM/YYYY):

12 / 4 / 11

(must be pre-application submission)

Details of pre-application advice received?

I WOULD ADVISE YOU THAT MY INFORMAL VIEW WOULD BE THAT AN APPLICATION TO CONSOLIDATE YOUR BUILDINGS WHICH ARE IN A POOR STATE OF REPAIR AND DETRACT FROM THE SETTING OF THE LISTED BUILDING WOULD BE LIKELY TO RECEIVE FAVOURABLE CONSIDERATION

Pedestrian and Vehicle Access, Roads and Rights of Way

Will new or altered vehicle access be proposed to or from the public highway?

Yes No

Will new or altered pedestrian access be proposed to or from the public highway?

Yes No

Do the proposals require any diversions, extinguishments and/or creation of public rights of way?

Yes No

If Yes to any questions, please show details on your plans or drawings and state the reference number(s) of the plan(s)/drawing(s)

N/A

7. Trees and Hedges

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 plan(s)/drawing(s):

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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 the plan(s) /drawing(s) and indicate the scale:

8. Materials

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

	Existing (where applicable)	NYM / 2012 / 0015 / FL Proposed	Not applicable	Don't Know
External walls	WOODEN PLANKED ON WOODEN FRAMEWORK.	→ WOODEN PLANKED ON WOODEN FRAMEWORK	<input type="checkbox"/>	<input type="checkbox"/>
Roof covering	WOODEN PLANKED COVERED WITH MINERAL FLEECE	→ WOODEN PLANKED COVERED WITH MINERAL FEEL.	<input type="checkbox"/>	<input type="checkbox"/>
Chimney			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Windows	WOODEN FRAMES	→ WOODEN FRAMES	<input type="checkbox"/>	<input type="checkbox"/>
External doors	WOODEN FRAMES.	→ WOODEN FRAMES	<input type="checkbox"/>	<input type="checkbox"/>
Ceilings			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Internal walls			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Floors	DECKING BOARDS	DECKING BOARD CARRIED ON BATONS AND TIMBER BEAMS	<input type="checkbox"/>	<input type="checkbox"/>
Internal doors		TIMBER FRAMEWORK	<input type="checkbox"/>	<input type="checkbox"/>
Rainwater goods		GUTTERING FALLPIPES TO WATER BUTTS.	<input 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)	GARDEN TOILET	→ GARDEN TOILET AS PER PLANS.	<input type="checkbox"/>	<input type="checkbox"/>

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

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

DRAWN BY R.A. JONES FOR S. FINSON (HUSBAND)

9. 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)	N/A
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)	11

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

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

10. 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):

N/A

11. 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 I

Grade II Ecclesiastical Grade II

Grade II* Ecclesiastical Grade II*

Don't know

12. 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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13. Parking

Will the proposed works affect existing car parking arrangements? Yes No

If Yes, please describe:

14. 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:

AGRICULTURAL HOLDINGS CERTIFICATE

Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7

Agricultural Land Declaration - You Must Complete Either A or B
 (A) None of the land to which the application relates is, or is part of, an agricultural holding.

Signed - Applicant:

Or signed - Agent: HUSBAND JOINT OWNER Date (DD/MM/YYYY):

[Signature Box]

[Signature Box]

05 01 2012

(B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:

Name of Tenant	Address	Date Notice Served

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Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

[Signature Box]

[Signature Box]

[Date Box]

16. 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.

- | | | |
|---|--|---|
| <input type="checkbox"/> 3 copies of a completed and dated application form: | <input type="checkbox"/> 3 copies of a design and access statement where proposed works fall within one of the following designated areas: | <input type="checkbox"/> The correct fee: |
| <input 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"/> <ul style="list-style-type: none"> • National Park • Site of special scientific interest • Conservation area • Area of outstanding natural beauty • World Heritage Site • The Broads | <input type="checkbox"/> 3 copies of the completed, dated Article 7 Certificate (Agricultural Holdings): |
| <input type="checkbox"/> 3 copies of other plans and drawings and information necessary to describe the subject of the application: | | <input type="checkbox"/> 3 copies of the completed, dated Ownership Certificate (A, B, C or D - as applicable): |

7. Declaration

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: HUSBAND JOINT OWNER Date (DD/MM/YYYY):

[Signature Box]

[Signature Box]

05 01 2012 (date cannot be pre-application)

18. 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):

19. Agent Contact Details

Telephone numbers

N/A.

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):

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20. 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: (HUSBAND)
SUZANNE RAWSON OR IONY JONES Telephone number:

Email address:

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VALIDATION CHECKLIST

HOUSEHOLDER APPLICATIONS
for extensions, detached outbuildings
and
other alterations to existing dwellings

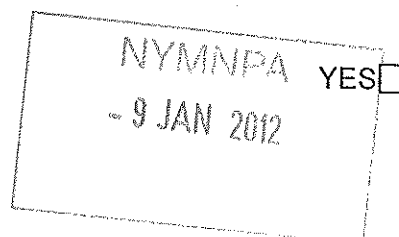


Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.

STANDARD REQUIREMENTS:

(3 copies to be supplied unless the application is submitted electronically)

- | | | |
|---|---|---|
| Completed application form | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| Completed Certificate of Ownership, A, B, C or D as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995. | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| Agricultural Holdings Certificate as required by Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| Location Plan at a scale of 1:2500 or 1:1250 with your application site edged red and any other land in your ownership edged in blue. | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| Existing site layout plans at a scale of 1:500, 1:200 or 1:100 showing the site in relation to existing buildings and site boundaries. The plan should indicate where existing features of the site are located including existing buildings (indicating proposed demolitions), trees (identifying any proposed felling), means of access and type of enclosure (wall, fence, hedges) and shall show adjacent properties/buildings. | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| Proposed site layout plans at a scale of 1:500, 1:200 or 1:100 | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| Existing and proposed elevations to a scale of 1:50 or 1:100 Requirements dependent on position of extension eg. no front elevation required for rear extension etc. | YES <input checked="" type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| Existing and proposed floor plans to a scale of 1:50 or 1:100 For each floor ie, ground and first floor plans required for two storey extension | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| Roof Plans to a scale of 1:50 or 1:100 If proposed development alters the existing roof. | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| Existing and proposed site sections and finished floor level and site levels to a scale of 1:50 or 1:100 | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |
| Design and Access Statement | YES <input type="checkbox"/> | N/A <input checked="" type="checkbox"/> |



Application fee

Please consult our enclosed Schedule of Fees.
Cheques are to be made payable to NYMNPA.

YES

NO

Non-Mains Drainage Form

YES

N/A

ADDITIONAL REQUIREMENTS (where likely to be relevant to the development proposed):

Supporting Planning Statement

YES

N/A

Biodiversity Survey and Report

YES

N/A

Daylight/sunlight Assessment

YES

N/A

Flood Risk Assessments/ Sequential Test (flood zones)

YES

N/A

Noise Impact Assessment

YES

N/A

Tree Survey/Arborculture Assessment

Where ground based works within 2 metres of the crown spreads of any trees covered by Tree Preservation Order or tree located in a village Conservation Area

YES

N/A

Photographs/photomontages

YES

N/A

Manufacturers specification/leaflet, for proposals incorporating plant/machinery (swimming pools/wind turbines/satellite dishes/solar panels/rooflights)

YES

N/A

