

North York Moors National Park Authority The Old Vicarage

Bondgate Helmsley

York YO62 5BP

NYM / 2012 / 0 2 3 8 /

12/238

Telephone: 01439 770667 Email: dc@northyorkmoors-npa.gov.uk Website: www.moors.uk.net

Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

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.

d D!!	A Name and Address	2. Agent Name and Address	
1. Applicant Name and Address			
Title:	PR First name: 1AN	Title: First name:	
Last name:	KESTIN	Last name:	
Company (optional):		Company (optional):	
Unit:	House number: House suffix:	Unit: House number: House suffix:	
House name:	TALL TREES	House name:	
Address 1:	SUFFIELD HILL	Address 1:	
Address 2:	SCARBORD UGH	Address 2:	
Address 3:		Address 3:	
Town:		Town:	
County:		County:	
Country:		Country:	
Postcode:	YO 13 OBH	Postcode:	-9350

3. C'e Address Details Please provide the full postal address of the application site. Unit: House House Suffix: House Suffix: House Name: SUFFICIO HILL Address 1: SUFFICIO HILL Address 2: SUFFICIO HILL Address 3: Town: County: Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description:	4. Pre-application Advice 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 as possible: Officer name: Reference: Date of advice (DD/MM/YYYY): Details of pre-application advice received: NYMNPA 1 3 APR 2012					
Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates? Yes No If you have answered No to this question, you cannot apply to make a non-material amendment. If you are not the sole owner, has notification under article 4F(3) of the GDPO been given? Yes No Not Applicable If you have answered No to this question, you cannot apply to make a non-material amendment. If you have answered Yes to this question, please give details of persons notified: Person Notified Address Date of Notification						
6. Authority Employee / Member						
With respect to the Authority, I am: (a) a member of staff	any of these statements apply to you? Yes No					
If yes please provide details of the name, relationship and role						
9 B						

7. scription Of Your Proposal					
Please provide a description of the approved development as shown on the decision letter, including application reference number an clark of decision in the sections below. Please also provide the original application type:					
CONSTRUCTION OF BRST PLOOR EITENSION, SUNROOM					
CONSTRUCTION OF BRST PLOOR ETTENSION, SUNROOM E EXTENSION TO LINK HOUSE , CELLAR BEZOW					
NYMNPA					
1 3 APR 2012					
Reference number: Date of decision (DD/MM/YYYY):					
NYM/2010/0880/FL 3-1-11					
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') [HOUSE HOLDER]					
8. Non-Material Amendment(s) Sought					
Please describe the non-material amendment(s) you are seeking to make:					
CHANGE ROOF CONSTRUCTION OF SUN ROOM					
FROM LIAD COVERING TO A SEDUM ROOF A					
PROM LEAD COVERING TO A SEDUM ROOF, A PROVERT RESISTANT SUCCULONT PLANT.					
ROOF AREA ~ 14.5 m2					
Are you intending to substitute amended plans or drawings? Yes No					
If Yes, please complete the following:					
Old plan/cirawing number(s):					
New plan/drawing number(s):					
Please state why you wish to make this amendment:					
DENVIRON MENTAL - REDUCED WATER RUNOFF , BETTENTION					
Please state why you wish to make this amendment: (1) ENVIRON MENTAL - REDUCED WATER RUNDER, BETTER ITEMT RETENTION (2) AESTIFETIC - GREEN ROOF WILL BETTER BLEND, WITH JURROUNDING GORDEN (3) REMOVE RISIL OF REPENTED THEFT - FLAT ROOF IS ENELLY ACCESCIBLE					
WITH JURROUNDING GORPEN					
3 REMOVE RISH OF REPENTED THEFT - FLAT					

O Ampliantian Regulation of the					
9. ^ nplication Requirements - Checklist Ple 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 not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.					
The original and 3 copies of a completed and dated application form:					
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:					
The correct fee;					
10. 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): 7 - 4 - 12.					
11. Applicant Contact Details (12. Agent Contact					
1 - Agent contact	Details				
Telephone numbers Telephone numbers					
	e number (optional): Imber (optional):				
13. Site Visit					
Can the site be seen from a public road, public footpath, bridleway or other public land?	/or □N:				
the planning authority needs to make an appointment to carry	Policant Other (If different from the agent/applicant's details)				
Emall address:					

