

NYM / 2012 / 0 3 1 0 / L B

2. Agent Name and Address

First name:

ALAN CAMPBAU ARCHITECTS

\$Date: 2007/05/11 09:53:51 \$ \$Revision: 1.16

North York Moors National Park Authority
The Old Vicarage
Bondgate
Helmsley
York
Y062 5BP

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

310

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

## 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.

Title:

Last name:

Company

Please complete using block capitals and black ink.

TONES

First name:

1. Applicant Name and Address

Title:

Last name:

Company

(optional):

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Unit:	House number:	House suffix:	Unit:	House House suffix:		
House name:	LYNDHURST		House name:			
Address 1:	9 BREARY LANE KAST		Address 1:	7 CUFF BAIDHE TERRACE		
Address 2:	BRAMTHORPE.		Address 2:			
Address 3:		NYMME	Address 3:			
Town:	LEEDS	2 3 MAY 2012	Town:	SCARBOROUGH		
County:		SB	County:	NORTH YORKSHIRE.		
Country:	Country:					
Postcode:	LS 16 98H		Postcode:	YO11 2-HA		
3. Descri	otion of Proposed Wor	ks				
Please desc	ribe the proposals to alter, ex	tend or demolish the listed	building(s):			
MINOR ALTERATIONS to PREVIOUSLY APPROVED						
OUTBUILDINGS FOR THE ADDITION OF 3NO ROOF						
LIGHTS to COTTAGE 3 TOGETHER WITH REPLICION						
OF IND FULL HEIGHT WINDOW OPENING TO COTTAGE 2						
+						

3. Description of Proposed Works (continued)	Please provide the full postal address of the application site
Has the work already started without consent?  If Yes, please state when the work was started (DD/MM/YYYY):  Autum 2011  (date must be pre-application submission)  Has the work been completed without consent?  If Yes, please state the date when the work was completed (DD/MM/YYYY):  NYM / 2012 / 0 3 1 0 / L B  (date must be pre-application submission)	Please provide the full postal address of the application site.  Unit: House number: Suffix: House suffix: House name: LAPYSMITH FARM  Address 1: STOUPL BROW  Address 2: FYLINGDALES  Address 3: Town: WHITBY  County: NORTH YORK SHIPL  Postcode (optional): Description of location or a grid reference. (must be completed if postcode is not known):  Easting: 495424 Northing: 502466.  Description:  SSL ATTACHED OBSIGN
A STATE OF THE STA	
S. Related Proposals  Are there any current applications, previous proposals or demolitions for the site?  If Yes please describe and include the planning application reference number(s), if known:    Description   Reference number	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:  VARIOUS  Reference:  Date (DD/MM/YYYY):  (must be pre-application submission)  Details of pre-application advice received?
7. Neighbour and Community Consultation	8. Council Employee / Member
Have you consulted your neighbours or the local community about the proposal?  If Yes please provide details:	Is the applicant or agent related to any member of staff or elected member of the council?  If Yes, please provide details:

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		inishes to be used in the building (demolition excl		
	Existing (where applicable)	Proposed 2012 / 0 3 1 0 / 1 B	Not applica	Doi Kno
External walls				
Roof covering		AM AS EXTISTING		
Chimney				
Windows	( *	3 NO. NEW DOOKLIGHTS + 1 FULL HEIGH WINDOW		
External doors				
Ceilings				
nternal walls				
Floors		AU AS		- 🗆
nternal doors		EXISTING		
ainwater goods				
oundary treatments e.g. fences, walls)				
ehicle access and ard standing		NYMNDA		
ghting		23 MAY 2012		
thers dd description)	e			
e you supplying additions	nal information on submitted drawings or plan	ns? Yes No		
DRGS. M	drawing(s) references:  10 S - 12 43 ) 25, 26, 3  62 63	27,28,57(A) 58(A),60,60,	, 61	1

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building?  Yes  No	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include: (you must answer each of the questions)
a) Total demolition of the listed building: Yes No	
b) Demolition of a building within the curtilage of the listed building:  Yes  No	a) Works to the interior of the building?  Yes  No  b) Works to the exterior of the building?  Yes  No
c) Demolition of a part of the listed building: Yes No	
If the answer to c) is Yes:	c) Works to any structure or object fixed to the property (or buildings within
i) What is the total volume of the listed building?(cubic metres)	its curtilage internally or externally?  Yes  No
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?
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	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):
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	SEE ATTACHED  PRAWINGS AND  DESIGN STATEMENT.
NYM / 2012 / D 3 1 D // L B	
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of	Has a Certificate of Immunity from Listing been sought in respect of
Buildings of Special Architectural or Historic interest? (Note: only	this building?
one box must be ticked)	Yes Don't know
Grade I Ecclesiastical Grade II	If Yes, please provide the result of the application:
Grade II* Don't know	W. W
Ecclesiastical Grade I	

information required will result in your application being dee the Local Planning Authority has been submitted.  3 copies of a completed and dated application form:  3 copies of a plan which identifies the land to which the application relates drawn to an identified	at all the information in support of your proposal. Failure to submit all med invalid. It will not be considered valid until all information required by  3 copies of of other plans and drawings or information necessary to describe the subject of the application:  3 copies of of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):
16. Declaration  I/we hereby apply for planning permission/consent as describing information.  Signed - Applicant:  Or signed -	ped in this form and the accompanying plans/drawings and additional
Telephone numbers  Country code: National number: Externum  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	nsion liber:  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):
19. Site Visit  Can the site be seen from a public road, public footpath, brid  If the planning authority needs to make an appointment to co out a site visit, whom should they contact? (Please select only)  If Other has been selected, please provide:  Contact name:  Email address:	arry Other (if different from the