



NYM / 2012 / 0334 / LB 1

2012/0334

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

LB exempt

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

- 1) TO REINSTATE ATTIC WINDOW TO EASTERN GABLE END WALL WHICH HAS BEEN FILLED IN WITH STONE. THE EXISTING LINTEL AND AREA FILLED CAN CLEARLY BE IDENTIFIED.
- 2) REINSTATEMENT OF LEADED LIGHT WINDOW AND NEW FRAME TO MATCH OTHERS EXISTING ON SOUTHER ELEVATION

3. Description of Proposed Works (continued)

Has the work already start 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: BEACHOLME

Address 1: COURT HILL

Address 2:

Address 3: ROBIN HOOD BAY

Town: WHITBY

County: NORTH YORKSHIRE

Postcode (optional): YO22 4SN

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

Easting: Northing:

Description:


DETACHED GRADE II LISTED PROPERTY.

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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
	

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:

BARY HEARSEY.

Reference:

EMAIL DATED 19/4/12

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

ON BASIS IT WAS AN EXISTING OPENING YOU SUGGEST THAT NO CONCERNS WOULD BE MADE REGARDING GLASS LEADED LIGHT REPLACEMENT WOULD BE SUPPORTED AND POSSIBLE GRANT AID

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:

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:

(This section is crossed out with a diagonal line.)

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

(This section is crossed out with a diagonal line.)

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):

PICTURES ATTACHED OF PROPOSED REINSTATEMENT OF GABLE ATTIC WINDOW ON EASTERN ELEVATION.
 PICTURE OF EXISTING BATHROOM WINDOW AND DRAWINGS OF PROPOSED LEADED LIGHT REPLACEMENT WINDOW.
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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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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:

3 copies of other plans and drawings or information necessary to describe the subject of the application:

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:

3 copies of the completed, dated Ownership Certificate (A, B, C, or D - as applicable):

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):

09/05/2012 (date cannot be pre-application)

17. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

18. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension 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, 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:

Telephone number:

GRAHAM KEMP

Email address: