

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

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

2012/0364

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning Act 1990 XISO # 11574

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.

2. Agent Name and Address

Please complete using block capitals and black ink.

Applicant Name and Address

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

Last name:
] Cost name.
Company (optional):
Unit: House House suffix:
House name:
Address 1:
Address 2:
Address 3:
Town:
County:
Country:
Postcode:
EXTENSION
NYMNPA 2 4 MAY 2012

3. 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):	(date must be pre-application submission)
Has the work already been completed without planning permission?	Yes No
ar in 2 o	(date must be pre-application submission)
If Yes, please state when the works were completed (DD/MM/YYYY):	
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
Please provide the full postal address of the application site.	Is a new or altered vehicle access proposed to or from the public highway? Yes No
Unit: House House suffix:	Is a new or altered pedestrian access
House Low Wood	proposed to or from the public highway? Yes No Do the proposals require any diversions,
Address 1: LOW DALBY	extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):
N 111-2	
Value and the second se	
County: N YORKS	
Postcode (optional): YOIS 7LT	
Has assistance or prior 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 possible: Officer name: MRS H SANDERS Reference: NMR M RES ASSO Date (DD MM YYYY): (must be pre-application submission) Advice given: LIKEN ACCORDANCE WITH DP 19	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 plans or drawings: 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 any plans or drawings:
8. Parking Will the proposed works affect existing car parking arrangements? If Yes, please describe:	9. Council Employee / Member Is the applicant or agent related to any member of staff or elected member of the Council? If Yes, please provide details:

10. Materials							
If applicable, please state what materials are to be used externally. Include type, colour and name for each material:							
	Existing (where applicable)	Proposed	Not applicable	Don't Know	Drawing references if applicable		
Walls	REMDERED BRICKWOLK	RENDERED BLOCKWOEK					
Roof	CONCLETE THE	CONCRETE TILE					
Windows	uPrc	uPVC					
Doors	u Prc	uPVC					
Boundary treatments (e.g. fences, walls)		24 MAY 2012	Ø				
Vehicle access and hard-standing		2 H MAT					
Lighting	a J		Q				
Others (please specify)			Ø				
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No If Yes, please state references for the plan(s)/drawing(s)/design and access statement:							
				- 14			

Agricultural Land Declaration - You M	AGRICULTURAL HOLDINGS CERTIFICATE lanning (General Development Procedure)Order 1995 Certificate under A ust Complete Either A or B application relates is, or is part of, an agricultural holding.	rticle 7
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
		22 5 12
B) I have/ The applicant has give before the date of this application, was listed below:	on the requisite notice to every person other than myself/ the applicant who, o was a tenant of an agricultural holding on all or part of the land to which this ap	n the day21 days
Name of Tenant	Address	Date Notice Served
	NYMNPA 2 4 MAY 2012	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
12. Planning Application Req	uirements - Checklist	
Please read the following checklist to	make sure you have sent all the information in support of your proposal. Failur application being deemed invalid. It will not be considered valid until all info	re to submit all ormation required by
3 copies of a completed	3 copies of a design and access The correct fee:	V
and dated application form: 3 copies of a plan which identifies the land to which the application	statement where proposed works fall within one of the following designated areas: 3 copies of the comple 7 Certificate (Agricultum 1997)	eted, dated Article ral Holdings):
relates drawn to an identified scale and showing the direction of North:	 National Park Site of special scientific interest Conservation area 3 copies of the completion of the co	
3 copies of other plans and drawings or information necessary to describe the subject of the application:	Area of outstanding natural beauty World Heritage Site The Broads Area of outstanding natural beauty World Heritage Site	able); ¡☑
13. Declaration		
I/we hereby apply for planning permis information.	sion/consent as described in this form and the accompanying plans/drawings	and additional
Signed - Applicant:	Or signed - Agent: Date (DD/MM/Y	YYY):
	22 5	2 (date cannot be pre-application)

14. Applicant Contact Details		15. Agent Contac	ct Details	
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Country code: Mob	ional number: bile number (optional): number (optional): nal):	Extension number:
16. Site Visit Can the site be seen from a public road, public	factanth heidlaway or	other public land?	Yes No	
If the planning authority needs to make an app out a site visit, whom should they contact? (Plea If Other has been selected, please provide: Contact name:	ointment to carry	Agent Z	Applicant Othe	r (if different from the t/applicant's details)
Email address:				
12. Planning Application Requireme Please read the following checklist to make sur- information required will result in your applicat the Local Planning Authority has been submitted. The completed and dated application form A plan which identifies the land to which the application relates drawn to an identified scale	e you have cent all the i	old. It will not be consider the original and 3 considers. Article	dered valid until all infor opies of the following d A design and acces statement where p works fall within or	rmation required by ocuments: ss roposed ne of the

