

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

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

12/848

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

2 1 DEC 2012

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.

il. Applid	ant Name and Address	2. Agent	Name and Ad
⊺itle:	Mr First name: Ray	Title:	Mr First
Last name:	Owen	Last name:	Winn
Company optional):		Company (optional):	
Unit:	House number: House suffix:	Unit:	House numbe
House name:		House name:	Old Barn Cott
Address 1:	Teydale Farm	Address 1:	Middle Farm
Address 2:	Whitby Road	Address 2:	Main Street
Address 3:	Cloughton	Address 3:	Allerston
Town:	Scarborough	Town:	Pickering
County:	North Yorkshire	County:	North Yorksh
Country:	UK	Country:	UK
Postcode:	YO13 0DZ	Postcode:	YO18 7PG
S. p.			

Title:	Mr	First name:	Richard	
Last name:	Winn			
Company (optional):				
Unit:	1	louse number:		House suffix:
House name:	Old Barn Cottage			
Address 1:	Middle Farm			
Address 2:	Main Street			
Address 3:	Allerston			
Town:	Pickering			
County:	North Yorkshire			
Country:	UK			
Postcode:	YO18 7PG			
I			······································	

Please provide the full postal address of the application site. House House Suffix:	4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No				
House name: Address 1: Ray Owen Waste Disposal The Falco	If Yes, please complete the following information about the divice you were given. (This will help the authority to deal with this application more efficiently).				
100	Please tick if the full contact details are not known, and then complete as much as possible:				
Address 2: Feydale Farm	Officer name:				
Address 3: Whitby Road	Mrs Hilary Saunders				
Town: Cloughton	Reference:				
County: Scarborough	N/A				
Postcode (optional): Description of location or a grid reference.	Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?				
(must be completed if postcode is not known): Fasting: Northing:					
Easting: Northing: Description:	Verbal advice regarding the suitability of the proposal and possible number of units				
N/A					
and date of decision in the sections below:	cision: 07 Nov 2012 (Date must be pre-application submission) (DD/MM/YYYY) on relates: 6. 7. 2 DEC 2012 8. 9.				
5.	10.				
Has the development already started? If Yes please state when the development started (DD/MM/YYYY): Has the development been completed? If Yes please state when the development was completed (DD/MM/YYYY): Yes No (date must be pre-application submission) (date must be pre-application submission)					
6. Discharge Of Condition	details that are boing submitted for approval:				
Please provide a full description and/or list of the materials/details that are being submitted for approval: See attached					
7. Part Discharge Of Condition(s) Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:					
	\$Date: 2007/05/11 09.53.51 \$ \$Revision: 1.13 \$				

Prease read the following checklist to make sure you have sent a information required will result in your application being deeme the Local Planning Authority has been submitted.	all the information in support of your proposal. Failure to submit all ed invalid. It will not be considered valid until all information required by
3 copies a completed and dated application form:	3 copies of other plans and drawings or information necessary to describe the subject of the application:
9. Declaration	
I/we hereby apply for planning permission/consent as described information.	in this form and the accompanying plans/drawings and additional
Signed - Applicant:	Or signed - Agent:
	Richard G Winn
Date (DD/MM/YYYY):	
17 December 2012 (date cannot be pre-application)	
10. Applicant Contact Details	11. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number	TACHIONI
	44
Country code: Mobile number (optional):	Country code: Mobile number (optional):
[44]	
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
12. Site Visit	
Can the site be seen from a public road, public footpath, bridlewa	ay 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,	
If Other has been selected, please provide: Contact name:	
Contact Harne.	Telephone number:
Email address:	
	2 1 DEC 2012

8. Planning Application Requirements - Checklist

\$Date: 2007/05/11 69.53:51 \$ \$Revision: 1.13 \$