

NYM / 2014 / 0 7 4 5 / 4 5 / 4 5

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

Telephone: 01439 772700 Email: planning@northyorkmoors.org.uk Website: www.northyorkmoors.org.uk

## 2014/0745

Application for removal or variation of a condition following grant of planning permission.

Town and Country Planning Act 1990.

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## 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.

1. Applicant Name and Address		
Title:	MR First name: FRANK	
Last name:	HALL	
Company (optional):		
Unit:	House House suffix:	
House name:	THE FOLD	
Address 1:	MAIN ROAD	
Address 2:	AISLABY	
Address 3:		
Town:	WHITBY	
County:	NORTH MORKSHIRE	
Country:	UNITED KINGDOM	
Postcode:	Y021 15W	

2. Agent Name and Address			
Title:	First name:		
Last name:			
Company (optional):			
Unit:	House House suffix:		
House name:			
Address 1:	NA		
Address 2:			
Address 3:			
Town:	NYMMPA		
County:	2 9 601 264		
Country:			
Postcode:			

3. Site Address Details	4. Pre-application Advice					
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?					
Unit: House House suffix:	authority about this application?  Yes No					
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this					
Address 1: MAIN ROAD	application more efficiently).  Please tick if the full contact details are not					
Address 2: AISLABY	known, and then complete as much as possible:					
Address 3:	Officer name:					
Town: WHITBY	PETER JONES Reference:					
County: NORTH YORKSHIRE	UNIT 4					
Postcode (optional): YO21 ISW	Date (DD/MM/YYYY):					
Description of location or a grid reference.	(must be pre-application submission) 10 · 10 · 2014					
(must be completed if postcode is not known):	Details of pre-application advice received?					
Easting: Northing:	I SAW PETER AT HELMSLEY AND SHOWED HIM A COPY OF REVISED PLANS AND IDEAS I					
Description:	WANTED TO DO, HE LOOKED AT THEM AND					
	CAVE ME ADVICE.					
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:						
TO MAKE DEVELOPMENT SMALLER AND	CHANGE THE ROOF TILES FOR SLATE					
AS CLEARLY SHOWN ON SUBMITTED F	LANS,					
Reference number: NYM/2006/0168/FL Date of decision (DE	O/MM/YYYY): (date must be pre-application					
Please state the condition number(s) to which this application relates:	L Submission)					
1.						
2. VARIATION OF CONDITION 2	6. NYMNDA					
3.	8. / # # OCT 2014					
4.	9.					
5.						
Has the development already started?	10.					
If Yes, please state when the development started (DD/MM/YYYY):	Yes No (date must be pre-application					
	submission)					
Has the development been completed?	Yes No					
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)						
5. Condition(s) - Removal						
Please state why you wish the condition(s) to be removed or changed:	·					
	j					
f you wish the existing condition to be changed, please state how you wish the condition to be varied:						
TO MAKE THE DEVELOPMENT SMALLER						
YARD DEVELOPMENT,						

application to find out the names r (owner is a person wipplication relates, but the following newsped):  Or signed  AGRICULTURAL LA pent Management Prand Declaration - You	than  1 - Agent:  ND DECLARATION	Order 2010 Certificat  one else who, on the deasehold interest with a is been unable to do so  ne following date (whice 21 days before the dat	lay 21 days before the state of	ore the eft to run earlier ation):
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platocic originant of	an agricultural holding.			
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				<u>O</u> -11
notice to every perso t of an agricultural ho	on other than myself/ th Iding on all or part of th	e applicant who, on the e land to which this ap	ie day 21 days oplication relati	es,
	Address		Date Notice	Served
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Or signed -	· Agent:		D-+- (DD/A4A	4 00000
Or signed -	- Agent:		Date (DD/MA	//YYYY)
	notice to every person of an agricultural ho	Address	notice to every person other than myself/ the applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, on the of an agricultural holding on all or part of the land to which this applicant who, on the of an agricultural holding on all or part of the land to which this applicant who applicant who which this applicant who are the original who are the land to which this applicant who are the original who are the land to which this applicant who are the original who are the land to which this applicant who are the original who are the land to which the land to	notice to every person other than myself/ the applicant who, on the day 21 days of an agricultural holding on all or part of the land to which this application related Address  Date Notice  NYMNPA

10. Declaration						
l/we hereby apply for <u>diaming permission</u> /consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/war knowledge, any facts stated are true and accurate and any opinions given are the						
genuine opinions of the person(s) giving them.	· · · · ·					
Signed - Applicant: / / Or signed - Agent:	Date (DD/MM/YYYY):					
	15 - 10 - 14 (date cannot be pre-application)					
11. Applicant Contact Details	12. Agent Contact Details					
Telephone numbers	Telephone numbers $\mathcal{N}(\mathcal{A})$					
Country code: National number: Extension number:	Country code: National number: Extension number:					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
Country code: Fax number (optional):	Country code: Fax number (optional):					
Email address (optional):	Email address (optional):					
13. 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? ( <i>Please select only one</i> )	Applicant Other (if different from the agent/applicant's details)					
If Other has been selected, please provide:						
Contact name:	Telephone number:					
Email address:						

