

Easting:

Northing:

501242

ublication of applications on planning authority websites.

NYM / 2015 / n 1 2 2 2 3 6 4 6 NYMAJPA 1.9 FEB 2005

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

## Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

lease note that the information provided on this application form and in supporting documents may be published on the Authority's website,

£97 # 13363

you require any further clarification, please contact the Authority's planning department. 1. Applicant Name, Address and Contact Details Title: Mrs SALLY First name: MICHULITIS Surname: Company name Country National Extension Street address: Code Number Number SCALBY ROAD Telephone number: BURNISTON Mobile number: Town/City **SCARBOROUGH** Fax number: County: NORTH YORKSHIRE United Kingdom Email address: Country: YO13 0HN Postcode: Are you an agent acting on behalf of the applicant? Yes No 2. Agent Name, Address and Contact Details No Agent details were submitted for this application 3. Site Address Details Full postal address of the site (including full postcode where available) Description: Suffix: House name: High Peak House Pollard Road Street address: Ravenscar Scarborough Town/City: County: YO13 0NB Postcode: Description of location or a grid reference (must be completed if postcode is not known): 497910

| Pre-application  |                |             |                     |                          |                    |          | <b>.</b>              |              |                 |           |  |
|--|----------------|-------------|---------------------|--------------------------|--------------------|----------|-----------------------|--------------|-----------------|-----------|--|
| Has assistance or prior ac   |                | •           |                     |                          | -                  |          | Yes                   | () No        |                 |           | •  |
| if Yes, please complete th   |                |             |                     |                          |                    | autho    | ority to deal with    | this applica | ation more effi | ciently): | - > -  |
| Officer name:  | $M \times M$   | 15 1        | $\Pi + Z Z$         | f G W G                  |                    |          |                       |              |                 | (         | <u>)                                    </u> |
| fitle: Mr  | First name:    | PETER       |                     |                          | Surn               | ame:     | JONES                 | ~            |                 |           | <u></u>                                      |
| Reference:   |                |             |                     |                          |                    |          |                       |              |                 |           |  |
| Date (DD/MM/YYYY):   | 16/02/2015     |             | (Must be pre-a      | application submiss      | sion)              |          |                       |              |                 |           |  |
| Details of the pre-applica   | tion advice re | ceived:     | •                   |                          |                    |          |                       |              |                 |           |  |
| Had a discussion with Pet<br>permission.   | er Jones who   | felt that w | ve complied with    | the local occupanc       | cy clause and ad   | vised (  | us to fill out this a | pplication   | form for appr   | oval of p | lanning                                      |
| Description of Pro   | posal          | · · · ·     |                     |                          |                    |          |                       |              |                 |           |  |
|  |                |             |                     |                          |                    |          |                       |              |                 |           |  |
| Please provide a description 3 of condition 3 of   |                |             | <u> </u>            |                          |                    | 046/04   | N. S. allanut Bak D.  |              |                 |           |  |
| variation of condition 3 c<br>dwelling.  | п расиппу ар   | provarivi   | W//2005/0915/FL     | and condition 13 of      | DI INTIMI4/02//000 | J4C/PF   | to allow High Pe      | eak House    | to be occupied  | as a roc  | ai occupancy                                 |
| Application reference nur  | nber:          | NYM/2013.   | /0432/FL            | <del></del>              |                    |          |                       | E            | ate of decision | n: 20     | /08/2013                                     |
| Please state the condition   | number(s) to   | which th    | is application rela | ates:                    |                    |          |                       |              |                 |           |  |
| Condition number(s):   |                |             |                     |                          | ************       |          |                       |              |                 |           |  |
| 3  |                |             |                     |                          |                    |          |                       |              |                 |           |  |
| las the development alre   | ady started?   |             | Yes                 | No                       | •                  |          |                       |              |                 |           |  |
| . Discharge of Con   | dition(s)      |             |                     |                          |                    |          |                       |              |                 |           |  |
| . 2.54.14. g2 0. 401.  | u,             |             |                     |                          |                    |          |                       |              |                 |           |  |
| Please provide a full descr  | ·              |             |                     |                          |                    | oval:    |                       |              |                 |           |  |
| Applying for approval on   | the local occu | pancy cia   | use attached to t   | пе патео ргорепу         | /                  |          |                       |              |                 |           |  |
| . Part Discharge of  | Condition      | ı(s)        |                     |                          |                    |          |                       |              |                 |           |  |
| Are you seeking to discha  | rae anly part. | of a condi  | tion?               | Yes (•)                  | Mo                 |          |                       |              |                 |           |  |
| tre you seeking to diseria   |                | or a condi  |                     | () 165 (9)               |                    |          |                       |              |                 |           |  |
| Site Visit   |                |             |                     |                          |                    |          |                       |              |                 |           |  |
| Can the site be seen from  | a problig road | public fo   | ataath beidlawaa    | بروا وناطيبو بروطئو بروي | - d1               |          | © V 0                 | \ Na         |                 |           |  |
|  | ·              | •           | •                   | · -                      |                    |          | 100                   | ) No         |                 |           |  |
| f the planning authority r   |                |             | _                   |                          | m should they co   | ontact   | / (Please select o    | niy one)     |                 |           |  |
| The agent (  | The applica    | ant (       | Other person        | ı                        |                    |          |                       |              |                 |           |  |
| . Declaration  |                |             |                     |                          |                    |          |                       |              |                 |           |  |
|  | ning nazartt   | ion/esses   | والمتعالية والموام  | sthic force and the co   |                    | alas = 1 | January and A         |              |                 |           |  |
| we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and<br>dditional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any |                |             |                     |                          |                    |          |                       | _            |                 |           |  |
| pinions given are the ger  | uine opinions  | s of the pe | erson(s) giving the | em.                      |                    |          |                       | $\boxtimes$  | Date 1          | 9/02/20   | 15   |
|  |                |             |                     |                          |                    |          |                       | ••••         |                 |           |  |

NY 1 9 FEB 2015