



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

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

Town and Country Planning Act 1990.

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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.

Applicant Name and Address	2. Agent Name and Address
Title: MR First name: ANDREW	Title: First name:
ast name: DONG GHUE	Last name:
Company PUNCIBLE SPOON	Company (optional):
Jnit: House number: 16 House suffix:	Unit: House House suffix:
House NUGRAUS HOUSE	House name:
Address 1: HIGH S:T	Address 1:
address 2: HINDERWELL	Address 2:
ddress 3:	Address 3:
OWN: SALTBURN	Town:
ounty: N, VILS.	County:
ountry: UK	Country:
ostcode: TS13 STH.	Postcode:

3. Site Address Details	4. Pre-application Advice			
Please provide the full postal address of the application site.  House // House	Has assistance or prior advice been sought from the local authority about this application?			
number: 16 suffix:	, I res I No			
House name: MULGRAUE HOUSE	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: HIGH S.T.	application more efficiently). Please tick if the full contact details are not			
Address 2: HINDERWELL	known, and then complete as much as possible:			
Address 3:	Officer name:			
Town: SALTBURN	Reference:			
County: N. YORKS	THE COURT OF THE C			
Postcode (optional): ISIS JJ+(.	Date (DD/MM/YYYY):			
Description of location or a grid reference.	(must be pre-application submission)			
(must be completed if postcode is not known):	Details of pre-application advice received?			
Easting: Northing: Description:	NYMNPA			
Description.	1 6 JUN 2015			
	1 0 33.11 2013			
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:				
or government to specify	1 30 200,			
original Application NYM/2014/0205/CU and was approved, Garner naw you to public.				
Reference number:  Date of decision (DD/MM/YYYY):  (date must be pre-application submission)				
Please state the condition number(s) to which this application relates				
1.	6.			
2.	7.			
3.	8.			
4.	9.			
5.	10.			
Has the development already started?	Yes No			
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)			
Has the development been completed?				
If Yes, please state when the development was completed (DD/MM/YYYY): $3 \sqrt{03/2015}$ . (date must be pre-application submission)				
6. Condition(s) - Removal				
Please state why you wish the condition(s) to be removed or changed:				
Original times for tea garden customer use was until 17.00 hours.				
Original times fortea garden customer use was until 17.00 hours. During summer periods we think this is too early.				
If you wish the existing condition to be changed, please state how you wish the condition to be varied:				
World like to vary it so tea garden can open till 19.30 hours.				
	ı			

8. Agricultural Land Declaration	1				
AGRICULTURAL LAND DECLARATION  Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12  Agricultural Land Declaration - You Must Complete Either A or B					
(A) None of the land to which the application relates is, or is part of, an agricultural holding.					
Signed - Applicant:	Or signed -	Agent:	Date (DD/MM/YYYY):		
(B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:					
Name of Tenant		Address	Date Notice Served		
Signed - Applicant:	Or signed - /	Agent:	Date (DD/MM/YYYY):		
9. 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.					
The original and 3 copies of a completed and dated application form:		The original and 3 copies of the c Ownership Certificate (A, B, C, or	completed, dated D - as applicable):		
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:  The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):			completed, dated I Holdings):		
The correct fee:					

10. Declaration				
I/we hereby apply for planning permission/consent as described in inform on. I/we confirm that, to the best of my/our knowledge, argenuin, pinions of the person(s) giving them.	this form and the accompanying plans/drawings and additional ny facts stated are true and accurate and any opinions given are the			
Signed - Applicant: Or signed - Agent	: Date (DD/MM/YYYY):			
	15/06/2015 (date cannot be pre-application)			
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers	Telephone numbers			
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):	Essail address (astiss all)			
Email address (optional):  Email address (optional):				
13. Site Visit				
Can the site be seen from a public road, public footpath, bridleway c	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)	Applicant Other (if different from the agent/applicant's details)			
If Other has been selected, please provide:				
Contact name:	Telephone number:			
Email address:	MVIII			
	16 JUN 2015			
	200011 2013			