



NYMNPA  
25 SEP 2015

North York Moors National Park Authority  
The Old Vicarage  
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### Application for Planning Permission. Town and Country Planning Act 1990

1385 #13767  
25/9/15

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://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:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

#### 2. Agent Name and Address

Title:  First name:

Last name:

Company (optional):

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Country:

Postcode:

#### 3. Description of the Proposal

Please describe the proposed development, including any change of use:

(a) Change of use of garages at Hilltop Cottage for use as retail sales and brewing for cordials, cider etc.

(b) Installation of shopfront and boarding over second garage door and new fence in line with garage front.

(c) Roofing over pallet area behind new fence.

(d) Shed to side of garages plus altering paths and providing customer parking and signs etc.

Has the building, work or change of use already started?

Yes  No

If Yes, please state the date when building, work or use were started (DD/MM/YYYY):

(date must be pre-application submission)

Has the building, work or change of use been completed?

Yes  No

If Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY):

(date must be pre-application submission)

#### 4. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:  Hilltop & Hillcrest cottages

Address 1:  Suffield

Address 2:

Address 3:

Town:  Scarborough

County:  North Yorkshire

Postcode (optional):  YO13 0BJ

Description of location or a grid reference. (must be completed if postcode is not known):

Easting:  Northing:

Description:

#### 6. Pedestrian and Vehicle Access, Roads and Rights of Way

Is a new or altered vehicle access proposed to or from the public highway?  Yes  No

Is a new or altered pedestrian access proposed to or from the public highway?  Yes  No

Are there any new public roads to be provided within the site?  Yes  No

Are there any new public rights of way to be provided within or adjacent to the site?  Yes  No

Do the proposals require any diversions /extinguishments and/or creation of rights of way?  Yes  No

If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan (s)/drawings(s)

New parking for customers to be provided but using existing access points.

#### 5. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

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 as possible:

Officer name:  Rosie Gee & Hsary Saunders

Reference:  NYM/2015/ENQ/11205

Date (DD/MM/YYYY):  02-07-2015  
(must be pre-application submission)

Details of pre-application advice received?  
 Subject to details but in principle OK.

#### 7. Waste Storage and Collection

Do the plans incorporate areas to store and aid the collection of waste?  Yes  No

If Yes, please provide details:  
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Have arrangements been made for the separate storage and collection of recyclable waste?  Yes  No

If Yes, please provide details:

#### 8. Authority Employee / Member

With respect to the Authority, I am: (a) a member of staff  
(b) an elected member  
(c) related to a member of staff  
(d) related to an elected member

Do any of these statements apply to you?  Yes  No

If Yes, please provide details of the name, relationship and role

## 9. 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
Walls	Natural Stone	Stained timber to shed	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Roof	Main house natural slate garage etc slate coloured concrete tiles	Corrugated perspex to pallet roof. Mineral felt to shed roof	<input type="checkbox"/>	<input type="checkbox"/>
Windows	Painted timber to front but white upvc to rear & side.	Painted timber shopfront & boarding to garage door.	<input type="checkbox"/>	<input type="checkbox"/>
Doors	Painted Timber	Painted Timber.	<input type="checkbox"/>	<input type="checkbox"/>
Boundary treatments (e.g. fences, walls)	Part stone wall part hedges	No Change but front fence at garage to be stained.	<input type="checkbox"/>	<input type="checkbox"/>
Vehicle access and hard-standing	Existing gravel areas.	No Change except part is now dedicated to customers with minor layout changes	<input type="checkbox"/>	<input type="checkbox"/>
Lighting			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Others (please specify)			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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:

Existing drawing  
Proposed drawing.

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## 10. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces:

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	6 or 7 spaces.	Same if bar but part now	dedicated to customers
Light goods vehicles/ public carrier vehicles	—		
Motorcycles	—		
Disability spaces	None	One	One
Cycle spaces	—	—	—
Other (e.g. Bus)	—	—	—
Other (e.g. Bus)	—	—	—

### 11. Foul Sewage

Please state how foul sewage is to be disposed of:

- Mains sewer
- Septic tank
- Package treatment plant
- Cess pit
- Other

Are you proposing to connect to the existing drainage system?  Yes  No

If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):

No Changes

### 12. Assessment of Flood Risk

Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)

- Yes
- No

If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.

Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?  Yes  No

Will the proposal increase the flood risk elsewhere?  Yes  No

How will surface water be disposed of?

- Sustainable drainage system
- Soakaway
- Main sewer
- Existing watercourse
- Pond/lake

### 13. Biodiversity and Geological Conservation

To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals.

Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to or near the application site?

a) Protected and priority species:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

b) Designated sites, important habitats or other biodiversity features:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

c) Features of geological conservation importance:

- Yes, on the development site
- Yes, on land adjacent to or near the proposed development
- No

### 14. Existing Use

Please describe the current use of the site:

Private houses Mrs Michael Tildley in Hilltop cottage and son & daughter in law in Hillcrest ie family business.

Is the site currently vacant?  Yes  No

If Yes, please describe the last use of the site:

When did this use end (if known)? DD/MM/YYYY

(date where known may be approximate)

Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.

Land which is known to be contaminated?  Yes  No

Land where contamination is suspected for all or part of the site?  Yes  No

A proposed use that would be particularly vulnerable to the presence of contamination?  Yes  No

### 15. Trees and Hedges

Are there trees or hedges on the proposed development site?  Yes  No

And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character?  Yes  No

If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'.

### 16. Trade Effluent

Does the proposal involve the need to dispose of trade effluents or waste?  Yes  No

If Yes, please describe the nature, volume and means of disposal of trade effluents or waste

### 17. Residential Units (Including Conversion)

Does your proposal include the gain, loss or change of use of residential units?  
 If Yes, please complete details of the changes in the tables below:

Yes  No

#### Proposed Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>A</b>

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>B</b>

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>C</b>

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>D</b>

**Total proposed residential units (A + B + C + D) =**

#### Existing Housing

Market Housing	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>E</b>

Social Rented	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>F</b>

Intermediate	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>G</b>

Key worker	Not known	Number of Bedrooms					Total
		1	2	3	4+	Unknown	
Houses	<input type="checkbox"/>						a
Flats and maisonettes	<input type="checkbox"/>						b
Live-work units	<input type="checkbox"/>						c
Cluster flats	<input type="checkbox"/>						d
Sheltered housing	<input type="checkbox"/>						e
Bedsit/studios	<input type="checkbox"/>						f
Unknown type	<input type="checkbox"/>						g
<b>Totals (a + b + c + d + e + f + g) =</b>							<b>H</b>

**Total existing residential units (E + F + G + H) =**

**TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):**

## 18. All Types of Development: Non-residential Floorspace

Does your proposal involve the loss, gain or change of use of non-residential floorspace?  Yes  No

If you have answered Yes to the question above please add details in the following table:

Use class/type of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal floorspace to be lost by change of use or demolition (square metres)	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	<input type="checkbox"/>	16m <sup>2</sup> garage	16m <sup>2</sup> was garage	16m <sup>2</sup> now shop	NIL except shed.
	<input type="checkbox"/>	16m <sup>2</sup> for both garages	<del>16m</del> 16m <sup>2</sup> including brewing area.		NIL.
A2	<input type="checkbox"/>	—	—		
A3	<input type="checkbox"/>	—	—		
A4	<input type="checkbox"/>	—	—		
A5	<input type="checkbox"/>	—	—		
B1 (a)	<input type="checkbox"/>	—	—		
B1 (b)	<input type="checkbox"/>	—	—		
B1 (c)	<input type="checkbox"/>	—	—		
B2	<input type="checkbox"/>	—	—		
B8	<input type="checkbox"/>	—	—		
C1	<input type="checkbox"/>	—	—		
C2	<input type="checkbox"/>	—	—		
D1	<input type="checkbox"/>	—	—		
D2	<input type="checkbox"/>	—	—		
OTHER	<input type="checkbox"/>	—	—		
Please Specify	<input type="checkbox"/>	—	—		
Total		32m <sup>2</sup>	32m <sup>2</sup>	32m <sup>2</sup>	NIL

In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms

Use class	Type of use	Not applicable	Existing rooms to be lost by change of use or demolition	Total rooms proposed (including changes of use)	Net additional rooms
C1	Hotels	<input type="checkbox"/>			
C2	Residential Institutions	<input type="checkbox"/>			
OTHER		<input type="checkbox"/>			
Please Specify		<input type="checkbox"/>			

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Total full-time equivalent

## 19. Employment

Please complete the following information regarding employees:

	Full-time	Part-time	
Existing employees	Self employed family	business	
Proposed employees	No	Change	

## 20. Hours of Opening

Please state the hours of opening for each non-residential use proposed:

Use	Monday to Friday	Saturday	Sunday and Bank Holidays	Not known
Retail sales.	10-30 to 6pm	10-30 to 6pm	10-30 to 6pm	

## 21. Site Area

Please state the site area in hectares (ha)

## 22. Industrial or Commercial Processes and Machinery

Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:

Is the proposal a waste management development?  Yes  No

If the answer is Yes, please complete the following table:

	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	Maximum annual operational throughput in tonnes (or litres if liquid waste)
Inert landfill	<input type="checkbox"/>		
Non-hazardous landfill	<input type="checkbox"/>		
Hazardous landfill	<input type="checkbox"/>		
Energy from waste incineration	<input type="checkbox"/>		
Other incineration	<input type="checkbox"/>		
Landfill gas generation plant	<input type="checkbox"/>		
Pyrolysis/gasification	<input type="checkbox"/>		
Metal recycling site	<input type="checkbox"/>		
Transfer stations	<input type="checkbox"/>		
Material recovery/recycling facilities (MRFs)	<input type="checkbox"/>		
Household civic amenity sites	<input type="checkbox"/>		
Open windrow composting	<input type="checkbox"/>		
In-vessel composting	<input type="checkbox"/>		
Anaerobic digestion	<input type="checkbox"/>		
Any combined mechanical, biological and/or thermal treatment (MBT)	<input type="checkbox"/>		
Sewage treatment works	<input type="checkbox"/>		
Other treatment	<input type="checkbox"/>		
Recycling facilities construction, demolition and excavation waste	<input type="checkbox"/>		
Storage of waste	<input type="checkbox"/>		
Other waste management	<input type="checkbox"/>		
Other developments	<input type="checkbox"/>		

Please provide the maximum annual operational throughput of the following waste streams:

Municipal	
Construction, demolition and excavation	
Commercial and industrial	
Hazardous	

If this is a landfill application you will need to provide further information before your application can be determined. Your waste planning authority should make clear what information it requires on its website.

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## 23. Hazardous Substances

Does the proposal involve the use or storage of any of the following materials in the quantities stated below?  Yes  No  Not applicable

If Yes, please provide the amount of each substance that is involved:

Acrylonitrile (tonnes) <input type="text"/>	Ethylene oxide (tonnes) <input type="text"/>	Phosgene (tonnes) <input type="text"/>
Ammonia (tonnes) <input type="text"/>	Hydrogen cyanide (tonnes) <input type="text"/>	Sulphur dioxide (tonnes) <input type="text"/>
Bromine (tonnes) <input type="text"/>	Liquid oxygen (tonnes) <input type="text"/>	Flour (tonnes) <input type="text"/>
Chlorine (tonnes) <input type="text"/>	Liquid petroleum gas (tonnes) <input type="text"/>	Refined white sugar (tonnes) <input type="text"/>
Other: <input type="text"/>	Other: <input type="text"/>	
Amount (tonnes): <input type="text"/>	Amount (tonnes): <input type="text"/>	

### 27. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our 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):

12-09-2015 (date cannot be pre-application)

### 28. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Country code:	Mobile number (optional):
<input type="text"/>	<input type="text"/>

Country code:	Fax number (optional):
<input type="text"/>	<input type="text"/>

Email address (optional):

### 29. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text"/>	<input type="text"/>

Country code:	Mobile number (optional):
<input type="text"/>	<input type="text"/>

Country code:	Fax number (optional):
<input type="text"/>	<input type="text"/>

Email address (optional):

### 30. 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? (Please select only one)  Agent  Applicant  Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address:

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# Validation Checklist

## Planning Permission – Non Householder Applications



To ensure that the Planning Officer dealing with your planning application has a complete picture on which to base their judgments and to ensure proper public consideration, the following information is required at application submission stage. Failure to supply the required information with a planning application submission will delay a decision on the proposal as the statutory determination period will not begin until the required information is submitted and the validation requirements fulfilled.

**Please complete the attached checklist to indicate what you have included with your application. All plans should include paper size, key dimensions and scale.**

### Standard National Validation Requirements

(Three copies are to be supplied unless the application is submitted electronically)

<b>Completed Application Form with Signed and Dated Declaration</b>	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Completed Certificate of Ownership A, B, C or D</b> (only one to be completed) as required by Article 12 of the Town and Country Planning (Development Management Procedure) (England) Order 2010.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Completed Agricultural Holdings Certificate A or B</b> (only one to be completed) as required by Article 12 of the Town and Country Planning (Development Management Procedure) (England) Order 2010.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Location Plan</b> based on an up-to-date map, to a recognised scale i.e. 1:2500 or 1:1250 with a north arrow labelled and with your application development site edged in red and any other land in your ownership edged in blue.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Existing and Proposed Site Layout Plans</b> to a recognised scale i.e. 1:100, 1:200 or 1:500 with a north arrow labelled.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Existing and Proposed Elevations</b> to a recognised scale i.e. 1:50 or 1:100.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Existing and Proposed Floor Plans</b> to a recognised scale i.e. 1:50 or 1:100.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>
<b>Existing and Proposed Roof Plans</b> (if the proposal alters the existing roof) to a recognised scale i.e. 1:50 or 1:100.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
<b>Existing and Proposed Sections and Finished Floor Levels</b> to a recognised scale which is no less than 1:100.	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
<b>Design and Access Statement</b> Please see Design and Access Statement Guidance Note for further information.	YES <input checked="" type="checkbox"/>	NO <input type="checkbox"/>

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**Application Fee**

Please see the Authority's Fee Sheet for further information.

YES

NO

**Environmental Impact Assessment (if applicable)**

YES

NO

**Standard Local Validation Requirements**

(Three copies are to be supplied unless the application is submitted electronically)

**Bat Scoping Survey** to ensure that nature conservation interests are not unduly affected by the development.

YES

NO

Please see Planning Advice Note 2 (Planning and Biodiversity) for further information.

**Flood Risk Assessments/Sequential Test** to ensure that the implications of flooding are satisfactorily addressed.

YES

NO

For further advice please contact the Environment Agency on 01904 692296 or see their website [www.environment-agency.gov.uk](http://www.environment-agency.gov.uk)

**Tree Survey/Arboricultural Assessment** to ensure tree preservation issues are properly addressed.

YES

NO

Please see Design Guide Part 3: Trees and Landscape for further information.

**Structural Survey** prepared by a suitably qualified structural engineer in order to ensure that the building is structurally sound and capable of conversion without the need for significant rebuilding and/or alterations.

YES

NO

**Statement of Agricultural Need** in order to assess whether the need to live on the site is essential.

YES

NO

**Affordable Housing Statement** which sets out what the latest Housing Needs Survey for the locality indicates and which provides an explanation of how the scheme meets that need together with details of how the occupancy of the properties will be maintained in perpetuity as 'affordable housing'.

YES

NO

Please see the Housing Supplementary Planning Document for further advice and the relevant proformas.

**Local Occupancy Proforma (in relation to schemes for new build dwellings/conversions to dwellings for sale under Core Policy J)** which sets out the local need for the dwelling.

YES

NO

Please see the Housing Supplementary Planning Document for further advice and the relevant proformas.

**Heritage Statement** with appropriate mitigation necessary to ensure conservation issues are properly addressed.

YES

NO

Please see Heritage Statement Guidance Note for further information.

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