

NYMNPA

25/04/2018

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

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

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.

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1. Applicant N	ame, Address a	nd Contact Details			
Title: Mr	First Name:	John D.		Surname:	Smith
Company name:	North Yorkshire Co	ounty Council			
Street address:	C/O Agent]		
			Telephone numb	er:	
			Mobile number:		
Town/City:			Fax number:		
Country:			Email address:		
Postcode:					
Are you an agent	acting on behalf of th	ne applicant?	⊚ Yes ℚ N	lo	
2. Agent Name	, Address and C	Contact Details			
	_				
Title: Mrs	First Name:	Aisling		Surname:	Kelly
Company name:	Lichfields				
Street address:	3rd Floor]		
	15 St Paul's Street		Telephone numb	er:	
			4		
			Mobile number:		
Town/City:	Leeds		Mobile number: Fax number:		
Town/City: Country:	Leeds]		

3. Site Addre	ss De	tails									
Full postal addre	ss of th	ne site (includinç	full postcode	where available	e)	Description:					
House:			Suffix:]						
House name:	Whitb	y Park & Ride			ĺ						
Street address:	Junct	ion of A171, B14	160 and Bark	ers Lane	ĺ						
					ĺ						
					ĺ						
Town/City:	Whitb	у			ĺ						
Postcode:	YO21	1AB			ĺ						
Description of lo											
Easting:	4874]						
Northing:	51019	96			ĺ						
					J						
4. Pre-applica	ation /	Advice									
Has assistance	or prior	advice been so	ught from the	local authority a	about thi	s application?			Yes	No	
If Yes, please co	mplete	the following in	formation abo	out the advice yo	ou were	given (this will h	nelp the a	authorit	y to deal with t	this application more	efficiently):
Officer name:											
Title: Mr		First name:	Rob				Surna	ame:	Smith		
Reference:											
Date (DD/MM/Y	YYY):	30/10/2017	(Must be	pre-application	submiss	ion)					
Details of the pre											
Confirmation of	submis	ssion requiremen	115								
5. Description	n of th	ne Proposal									
Please provide a	a descri	ption of the app	roved develor	oment as shown	on the	decision letter:					
Variation of con	ditions	2 (material ame	ndment), 4, 8	and 9 of planni	ng appro	oval NYM/2012/	/0757/EIA	to all	ow alterations	to layout and landsca	aping design
					ening tin	nes and siting o	or perman			additional parking sp	aces
Application refer			NYM/2014					Date	e of decision:	12/08/2015	
Please state the Condition number		on number(s) to	which this ap	pplication relates	5:						
7, 13, 14, 15, 16	and 1	7									
Has the develop	ment a	Iready started?	Yes	○ No If Ye	es, pleas	se state when th	ne develo	pment	was started:	06/01/2014	
Has the develop	ment b	een completed?	Yes	No							
0 D' 1		I' ()									
6. Discharge	or Co	naition(s)									
Please provide a	a full de	scription and/or	list of the ma	terials/details th	at are b	eing submitted f	for approv	val:			
See Covering L	etter										

7. Part Discharge of Condition(s)					
Are you seeking to discharge only part of a condition?	□ Ye	s <u>•</u>	No		
8. Site Visit					
o. one visit					
Can the site be seen from a public road, public footpath, bridleway or other public land?	Ye	s Q	No		
If the planning authority needs to make an appointment to carry out a site visit, whom should they	contact? (Ple	ease se	ect only o	one)	
The agent					
9. Declaration					
I/we hereby apply for planning permission/consent as described in this form and the accompanying drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts true and accurate and any opinions given are the genuine opinions of the person(s) giving them.		~	Date	25/04/2018	