

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

Application for a Lawful Development Certificate for a Proposed use or development. Town and Country Planning Act 1990: Section 192, as amended by section 10 of the Planning and Compensation act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2015

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form and 'The Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended).

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: MR First name: GRAITAM
Last name:	Last name: LEM
Company (optional): TAND CPPLIMITED	(optional): Towns Country Janning las theyship
Unit: House number: House suffix:	Unit: House number: House suffix:
House name:	House name: THE SANCTUARY
Address 1:	Address 1: WROTHYM ILLC
Address 2: AGENT	Address 2: DUNS FOCD
Address 3:	Addréss 3:
Town:	Town: NR. GOD ARMING
County:	County: SURREY
Country:	Country: ENGLAND GUB 4PA