

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680

Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

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

1. Applicant N	ame, Address ar	nd Contact Details					
Title: Mrs	First name:	Matilda		Surname:	Ruiz de Cazaldo		
Company name							
Street address:	14 Templewood Av	renue			Country Code	National Number	Extension Number
				Telephone number	:		
				Mobile number:			
Town/City	London			Fax number:			
County:				rux riumber.			
Country:				Email address:			
Postcode:	NW3 7XA						
	cting on behalf of the		• Yes (No			
7 Title: Mr	e, Address and C	ontact Details		Surname:	Trehearne		
Company name:	lan Trehearne						
Street address:	20 New End Square				Country Code	National Number	Extension Number
				Telephone number	0044	2077945250	
				Mobile number:	0044	7876263387	
Town/City	Hampstead			Fax number:			
County:	London			rux riumber.			
Country:				Email address:			
Postcode:	NW3 1LN			iantrehearne@easy	net.co.uk		

003036330

3. Site Address	Details										
Full postal address	of the site (inc	luding full po	stcode where	available))	Descr	ription:				
House:	14		Suffix:								
House name:											
Street address:	Templewood	d Avenue									
Town/City:	London										
County:											
Postcode:	NW3 7XA					1					
Description of locat (must be completed			:								
Easting:	5258	34]					
Northing:	1861	66									
4. Pre-applicati									0 4 0		
Has assistance or pr		· ·		-					• Yes	No	
If Yes, please compl	ete the follow	ing informati	on about the	advice yo	u were given (this	s will he	elp the author	rity	y to deal with this ap	oplication more efficiently	/) :
Officer name:								_			
Title: Mr	First nar	me: Gavin					Surname:	S	Sexton		
Reference:											
Date (DD/MM/YYYY)): 25/11/	2013	(Must be	pre-appli	cation submissio	n)					
Details of the pre-ap	-	ice received:									
Telephone conversa Need to explain clea		ge required									
Please provide a deconversion of six fla Drawing Nos: Site L	scription of th	ne approved d	house (Class		on the decision le	etter:					
Application reference		2010/49								Date of decision:	07/02/2011
Please state the con Condition number(s	dition numbe			on relates:]	
1											
Has the developme	nt already sta	rted?	○ Yes	No							
6. Condition(s)	- Removal										
Please state why yo	u wish the co	ndition(s) to b	e removed or	changed:	:						
please see attached						:					
If you wish the exist Please see attached		to be change	d, piease state	e now you	ı wish the conditi	וסח נס ט	e varied:				
7. Site Visit											
Can the site be seen	from a public	c road nublic	footpath brid	lleway or	other public land	17			Yes No	1	
If the planning auth	-	•	•	-	•		they contact				
• The agent	_	applicant	Other p	-		0.104.4	mey comuc	. (. 10400 00.001 01.119 0	,	
8. Certificates (Certificate	B)									
					ificate of Owner						
	nt certifies th owner <i>(owne</i>	at I have/the a er is a person w	applicant has quith a freehold i	given the interest or	requisite notice t leasehold interest	to every t with at	rone else (as l Fleast 7 years l	liste <i>left</i>	ed below) who, on t t to run) and/or agric	te under Article 12 the day 21 days before th cultural tenant ("agricultu on relates.	

Ref: 25: 4692 Planning Portal Reference:

003036330

Owner/Agric	ates (Certificate B - ultural Tenant								Date not	ice served	
Name	Astoria Investment Mana	agement Lim	nited								
Number:		Suffix:					1				
Street:	Seaton Place]				
Locality:	St Helier]	/2013						
Town:	Jersey										
Postcode:	JE4 8YJ						J				
Name	Coronation Consulting (Froup Limite	d PO Box 641								
Number:	1 5	Suffix:					_				
Street:	Seaton Place										
Locality:	St Helier]		27/11	/2013	
Town:	Jersey										
Postcode:	JE4 8JY										
Title: Mr	First name:	lan			Surname:	Trehe	earne	1			
Person role:	Agent	De	eclaration date:	27/11/2013			\boxtimes	Declaration	n made		
9. Declara	ntion										
additional in	apply for planning permis formation. I/we confirm then are the genuine opinio	nat, to the be	est of my/our kno	wledge, any facts stat	ompanying plans/o ed are true and ac	drawing curate	gs and and any	\bowtie	Date 2	28/11/2013	