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020 7974 4444

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020 7974 1680

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

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

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.

1. Applicant Name and Address			
Title:	MR First name: PASL		
Last name:	WOODFORD		
Company (optional):	DAMSONETTI UK LTD		
Unit:	House number: House suffix:		
House name:	HELIPORT HOUSE		
Address 1:	38 LOMBARO ROAD		
Address 2:	BATTERSEA		
Address 3:			
Town:	LONDON		
County:	LONDON		
Country:			
Postcode:	SWII 3RP		

2. Agent Name and Address			
Title:	First name:		
Last name:	8		
Company (optional):			
Unit:	House number: House suffix:		
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

	Idaaaa Dataila	A Dun anniliantian Adulas
	ldress Details	4. Pre-application Advice  Has assistance or prior advice been sought from the local
Please provide the full postal address of the application site.  House House		authority about this application?
Unit:	number: suffix:	
House name:	BELVACO POIST	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: 17 MURRAY STREET		application more efficiently).  Please tick if the full contact details are not
Address 2: CAMDEL		known, and then complete as much as possible:
Address 3:		Officer name:
Town: Lougon		AMAN DA PECK
County: Longon		Reference:
Postcode		Date (DD/MM/VVVV)
(optional): NW ( QRE Description of location or a grid reference.		(must be pre-application submission)
	empleted if postcode is not known):	Details of pre-application advice received?
Easting: 5	79638 Northing: \24385	WRITTED ADVICE REGARDING THE DISCHARGING OF PAINING CONDITIONS AND CONFIRMING
Description		THE INFORMATION REQUIRED TO DISCHARGE
COMPRI	y Pws Basehrar Buivaing Sido Officia and Resionatal USP	COSPACES
5. Descri	ption Of Your Proposal	
Please prov	vide a description of the approved development as show	vn on the decision letter, including the application reference number
and date of	decision in the sections below:	SEMEST COMPLISING OFFICE (GLASS BI) OR STOPAGE
AND DIS	TRIBUTION (CLASE BB) USES AT BASI	FMEST AND GROWD FLOOR LEVELS AND 6 FLATS
C3×2	890, 2×3880 A-D IX STUDIO COLASS	FMRJT AND GROWD FLOOR LEVELS AND 6 FLATS 3) OURE BASEMENT, GROWD, FLOOT ANDSECOND
rooks	13 CLUDI-C CREATION OF TERRACE	at Arst Floor Laubl Prostise Hurray Street
Reference r	number: 2007/5336/P Date of decision:	(Date must be pre-application submission) (DD/MM/YYYY)
Please state	e the condition number(s) to which this application rela	tes:
1.		6.
	3	0.
2.	6 6	7.
3		<u> </u>
3.	6	7.
3.	6 7	7. 8.
3. 4. 5.	6 7 8	7. 8. 9.
3. 4. 5. Has the dev	6 7 8	7.  8.  9.  10.  Yes No  (date must be pre-application)
3. 4. 5. Has the det	& & & & & & & & & & & & & & & & & & &	7.  8.  9.  10.  Yes No  (date must be pre-application
3. 4. 5. Has the development of	6 8 In velopment already started? se state when the development started (DD/MM/YYYY):	7.  8.  9.  10.  Yes No  Calobizon (date must be pre-application submission)  Yes No  (date must be pre-application submission)
3. 4. 5. Has the det If Yes, plea Has the det	& Solution See State when the development started (DD/MM/YYYY): velopment been completed? see state when the development was completed (DD/MM)	7.  8.  9.  10.  Yes No  Calobias (date must be pre-application submission)  Yes No  (date must be pre-application (date must be pre-application)
3. 4. 5. Has the det If Yes, plea Has the det If Yes, plea	&  Note: The second of the sec	7.  8.  9.  10.  Yes No  colorized (date must be pre-application submission)  Yes No  (date must be pre-application submission)  (date must be pre-application submission)
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3. 4. 5. Has the development of the second o	velopment already started?  se state when the development started (DD/MM/YYYY): velopment been completed?  se state when the development was completed (DD/MM  rge Of Condition vide a full description and/or list of the materials/details  ischarge Of Condition(s) eking to discharge only part of a condition?	7.  8.  9.  10.  Yes No  (date must be pre-application submission)  Yes No  (date must be pre-application submission)  That are being submitted for approval:
3. 4. 5. Has the development of the second o	welopment already started? se state when the development started (DD/MM/YYYY): velopment been completed? se state when the development was completed (DD/MM arge Of Condition vide a full description and/or list of the materials/details	7.  8.  9.  10.  Yes No  (date must be pre-application submission)  Yes No  (date must be pre-application submission)  That are being submitted for approval:

8. 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 other plans and drawings or information necessary to describe the subject of the application:					
The correct fee:  ALREADY SEST 21/02/2013  ALREADY SEST 21/02/2013					
9. 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:					
P. Hard Isral					
Date (DD/MM/YYYY):					
19/03/2013 (date cannot be pre-application)					
10. Applicant Contact Details	11. 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):				
07816-917378					
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional):				
PALDPAMSOSETTIGROUP. COM					
12. Site Visit	ş				
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)  Applicant  Applicant  Other (if different from the agent/applicant's details)					
If Other has been selected, please provide:					
Contact name:	Telephone number:				

Email address: