

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 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.

1. Applicant Name, Address and Contact Details											
1. Applicant N	ame, Address and	i Contact Details									
Title: Mr	First name: Da	avid	Surname: So	chulhof							
Company name	Hudson Garden Room	ns									
Street address:	55 Charlotte Road			Country Code	National Number	Extension Number					
			Telephone number:								
T (0)			Mobile number:								
Town/City	London		Fax number:]						
County:			Tux Hambor.								
Country:			Email address:								
Postcode:	EC2A 3QF										
A			O No								
Are you an agent a	ecting on behalf of the a	pplicant? • Yes (No								
2 Agent Name	Address and Co	ntaat Dataila									
Z. Agent Name	e, Address and Co	ntact Details									
Title: Mr	First Name: Da	avid	Surname: So	chulhof							
Componynomo	Lludson Cordon Doom										
Company name:	Hudson Garden Roon	is		Country	National	Extension					
Street address:	55 Charlotte Road			Code	Number	Number					
			Telephone number:		02070362048						
			Mobile number:		07979072436						
Town/City	London		Fax number:								
County:	London		i ax ilullibel.								
Country:			Email address:								
Postcode:	EC2A 3QF		david@hudsongardei	nrooms.com							

3. Site Addres					5		
Full postal address	s of the site (inclu	ding full postcode whe		le)	Description:		
House:	8	Suffix:	А				
House name:					_		
Street address:	Lady Margaret	Road					
Town/City:	London						
County:							
Postcode:	NW5 2XS						
Description of loca (must be complete							
Easting:	52922	}			7		
Northing:	185324						
4. Pre-applica	tion Adviso						
		sought from the local a	authority (about this applica	tion? • Yes	No	
If Yes, please comp	plete the followir	g information about th	ne advice y	ou were given (th	is will help the authority to deal with this	application more efficie	ently):
Officer name:							
Title: Mr	First name	e: John			Surname: Nicholls		
Reference:							
Date (DD/MM/YYY	Y):	(Must I	be pre-app	olication submissi	on)		
Details of the pre-	application advic	e received:					
. Description	of Proposal						
-	-						
		approved developmen			etter:		
		ng to rear garden of ex	disiting flat	(Class C3)			
Application referer		2012/6319/P				Date of decision:	04/02/2013
		s) to which this applica	tion relate	es:			
CS13, CS14, CS15,							
Has the developm			(•) No	0			
6. Discharge o	f Condition(s	<u>(</u>)					
Please provide a fu	ull description an	d/or list of the materials	s/details th	nat are being subr	mitted for approval:		
I am providing full	information on t	he Sedum Roof we pro	pose to us	se, technical speci	fications, species list and maintenance req	uirements	
7. Part Discha	rge of Condit	ion(s)					
Are you seeking to	o discharge only p	part of a condition?		○ Yes ●	No		
8. Site Visit							
0	6	and on the Control of the In-			-10 V O N	l-	
		oad, public footpath, b					
-	_		-	t a site visit, whon	n should they contact? (Please select only	one)	
The agent		oplicant Othe	r person				
9. Declaration	 _						
I/we hereby apply	for planning perr	nission/consent as des	cribed in t	his form and the a	accompanying plans/drawings and		
additional informa	tion. I/we confirm		y/our knov	vledge, any facts s	stated are true and accurate and any	M	(00/0045
opinions given die	and genuine upil	mons of the personits) y	jivii iy ii lel	11.		∑ Date 21	/02/2013