

Email: [planning@camden.gov.uk](mailto: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

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://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:	NICOLA
Last name:	RADICE		
Company (optional):			
Unit:		House number:	17
		House suffix:	A
House name:			
Address 1:	BELSIZE LANE		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:			
Postcode:	NW3 5AD		

#### 2. Agent Name and Address

Title:	MISS	First name:	AYAKA
Last name:	TAKAKI		
Company (optional):	DONALD INSALL ASSOCIATES LTD		
Unit:		House number:	12
		House suffix:	
House name:			
Address 1:	DEVONSHIRE STREET		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:			
Postcode:	WIG 7AB		

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference.  
(must be completed if postcode is not known):

Easting:  Northing:

Description:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Reference:

Date (DD/MM/YYYY):   
(must be pre-application submission)

Details of pre-application advice received?

### 5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

Reference number:  Date of decision:  (Date must be pre-application submission) (DD/MM/YYYY)

Please state the condition number(s) to which this application relates:

1.	THE WORKS HERBY PERMITTED SHALL BE BEGUN NOT LATER THAN THE END OF 3 YEARS FROM THE DATE OF THIS DECISION	2.E	SAMPLES AND MANUFACTURER'S DETAILS OF ALL NEW FLOORS INCLUDING AN ASSOCIATED LOCATION PLAN AND PHOTO OF THE EXISTING FLOOR FINISHES TO BE REMOVED.
2.A	PLAN, ELEVATION AND SECTION DRAWINGS OF ALL NEW DOORS AT A SCALE OF 1:10 WITH TYPICAL MOULDING ...	2.F	DETAILS OF ANY WORKS OF ALTERATIONS OR UPGRADING NOT INCLUDED ON THE APPROVED DRAWINGS WHICH ARE REQUIRED TO SATISFY BUILDING REGULATIONS OR FIRE CERTIFICATION...
2.B	PLAN, ELEVATION AND SECTION DRAWINGS, INCLUDING JAMBS, HEAD AND CILL, OF ALL NEW	3	A METHOD STATEMENT FOR STRENGTHENING AND LEVELLING THE FLOORS INCLUDING DETAILS OF REMOVAL OF THE FLOOR BOARDS AND JOISTS SHALL BE SUBMITTED TO AND APPROVED...
2.C	SAMPLES AND MANUFACTURER'S DETAILS OF NEW FACING MATERIALS FOR THE NEW EXTENSION TO BE PROVIDED ON SITE AND RETAINED ON SITE DURING WORKS	4	NOTWITHSTANDING THE DETAILS AND ANNOTATIONS ON THE APPROVED DRAWINGS, A STATEMENT OF THE STRUCTURAL ALTERATIONS NECESSARY TO CREATE A DOORWAY ...
2.D	DRAWING OR SAMPLES OF ALL NEW ARCHITECTURAL DETAILS INCLUDING 1:2 OF ALL NEW SKIRTING AND CORNICING INCLUDING PHOTOS OF THE EXISTING TO BE REMOVED CLEARLY		

Has the development already started?

☐ Yes ☒ No

If Yes, please state when the development started (DD/MM/YYYY):

(date must be pre-application submission)

Has the development been completed?

☐ Yes ☒ No

If Yes, please state when the development was completed (DD/MM/YYYY):

(date must be pre-application submission)

### 6. Discharge Of Condition

Please provide a full description and/or list of the materials/details that are being submitted for approval:

### 7. Part Discharge Of Condition(s)

Are you seeking to discharge only part of a condition?

☐ Yes ☒ No

If Yes, please indicate which part of the condition your application relates to:

## 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: ☒

## 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:

*WBC Architects for Donald Insall Architects*

Date (DD/MM/YYYY):

*03/01/2013*

(date cannot be pre-application)

## 10. Applicant Contact Details

Telephone numbers

Country code:  National number:  Extension number:

Country code:  Mobile number (optional):

Country code:  Fax number (optional):

Email address (optional):

## 11. Agent Contact Details

Telephone numbers

Country code:  National number:  Extension number:

Country code:  Mobile number (optional):

Country code:  Fax number (optional):

Email address (optional):

*ayaka.takaki@insall-architects.co.uk*

## 12. Site Visit

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)

☒ Agent ☐ Applicant ☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

*AYAKA TAKAKI*

Telephone number:

*0207 245 9888*

Email address: *ayaka.takaki@insall-architects.co.uk*