

## 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.

Title:	First name:			
Last name:				
Company (optional):	GATEVILLE DEVELOPMENTS LIMITED			
Unit:	House number: 11 House suffix:			
House name:				
Address 1:	ALBA GARDENS			
Address 2:	THE STORE OF THE S			
Address 3:				
Town:	LONDON			
County:				
Country:				
Postcode:	NW11 9NS			

Title:	MR	First name:	ALASTAIR			
Last name:	NORTON					
Company (optional):	NORTON MAYFIELD ARCHITECTS					
Unit:		House number:	House suffix:			
House name:						
Address 1:	SPACEWORKS					
Address 2:	HARLAND WORKS					
Address 3:	JOHN STREET					
Town:	SHEFFIELD					
County:	retaine					
Country:						
Postcode:	S2 4QU					

2. Agent Name and Address

Annual Control	ddress Details		pplication Advice			
Unit:	ide the full postal address of the application site.  House 61-63 House	authority al	nce or prior advice been sought from the local bout this application?			
House	number: Suffix:	If Yes pleas	If Yes, please complete the following information about the advi			
name:	HOLMES ROAD	I you were gi	ven. (This will help the authority to deal with this			
Address 1:	HOLINES HOAD	Please tick i	more efficiently). f the full contact details are not			
Address 2:			then complete as much as possible:			
Address 3:		Officer nam	ne:			
Town:	Town: LONDON		Reference:			
County:	107 p. 0		NEW COLUMN			
Postcode (optional):	NW5 3AN		Date (DD/MM/YYYY):			
Description (must be co	of location or a grid reference. Impleted if postcode is not known):		(must be pre-application submission)  Details of pre-application advice received?			
Easting:	Northing:	tip)	- approximation advice received:			
Description						
	the another blog and the second and the second	][	Control of the Property of the Later of			
5. Descri	ption Of Your Proposal					
OUTLINE (CLASS B)	APPLICATION FOR THE ERECTION OF A 5 STORE  AT BASEMENT AND GROUND FLOOR LEVELS AND	Y PLUS BASEMENT D RESIDENTIAL (US	on letter, including the application reference number  BUILDING COMPRISING LIGHT INDUSTRIAL (USE SE CLASS C3) AT 1ST,2ND,3RD AND 4TH FLOORS			
(5X1BED A	AND 3X2BED UNITS) FOLLOWING DEMOLITION OF	EXISTING BUILDIN	NG.			
Reference n	umber: APP/X5210/A/11/2163152 Date of decisi	ion: 12/03/2012	(Date must be pre-application submission) (DD/MM/YYYY)			
Please state	the condition number(s) to which this application is	relates:	Submission) (DD/MM/YYYY)			
1. 1	1	6.				
2.	III some tradition for the	7.				
3.	11 400 54	8.				
4.		9.				
5.		10.				
Has the dev	relopment already started?		es 🔀 No			
	se state when the development started (DD/MM/YY		(date must be pre-application			
			submission)			
	elopment been completed?	Ye	es No (date must be pre-application			
if Yes, pleas	e state when the development was completed (DD)	/MM/YYYY): [	submission)			
6. Discha	rge Of Condition					
	ide a full description and/or list of the materials/deta	ails that are being su	ubmitted for approval:			
Shell spec	ification for proposed commercial unit					
7. Part Di	scharge Of Condition(s)	77				
Are you see	king to discharge only part of a condition?		☐ Yes 🔀 No			
	e indicate which part of the condition your applicati	on relates to:				

Please read the information red	Application Requirements - Ch following checklist to make sure you h juired will result in your application bei ing Authority has been submitted.	ave sent all th	ne information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by
The original and completed and	d 3 copies of a dated application form:	The or in	e original and 3 copies of other plans and drawings information necessary to describe the subject of the application:
The correct fee:			
genuine opinio	oly for planning permission/consent as we confirm that, to the best of my/our kins of the person(s) giving them.	described in t nowledge, any	this form and the accompanying plans/drawings and additional by facts stated are true and accurate and any opinions given are the
Signed - Applicant:			Or signed - Agent:  MR NORTON
Data (DD (MM ()	0000		I I I I I I I I I I I I I I I I I I I
Date (DD/MM/) 31/10/2012	(date cannot be pre-ap	plication)	
Telephone num Country code: Country code: Country code: Email address (country code)	National number:  Mobile number (optional):  Fax number (optional):	Extension number:	Telephone numbers  Country code: National number: Extension number:  0114 2700014  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):
If the planning a out a site visit, w	een from a public road, public footpath uthority needs to make an appointmer hom should they contact? <i>(Please selec</i> n selected, please provide:	t to carry	or other public land? Yes No  Applicant Other (if different from the agent/applicant's details)  Telephone number:
Email address:			