| | | | Can | nden |
|-------------------|------------------|-----------------------------------|----------------|------|
| Planning Services | Email (enquiries | s only): env.devcon@camden.gov.ul | For office use | |
| Camden Town Hall | Telephone | : 020 7974 1911 | Date | |
| Argyle Street | Fax | : 020 7974 5713 | Payee | Fee |
| London WC1H 8EQ | | | App. No. | |

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning 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.

t is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

| 1. Applic | ant Name and Address | 2. Agent Name and Address |
|------------------------|--------------------------------|---------------------------|
| Title: | MR First name: GUILHERME | Title: N/A First name: |
| Last name: | BRAFMAN | Last name: |
| Company (optional): | | Company (optional): |
| Unit: | House number: 17 House suffix: | Unit: House House suffix: |
| House name: | | House name: |
| Address 1: | ELLIDIT SQUARE | Address 1: |
| Address 2: | | Address 2: |
| Address 3: | | Address 3: |
| Town: | LONDON | Town: |
| County: | | County: |
| Country: | ENGLAND | Country: |
| Postcode: | NW3 354 | Postcode: |

3. Description of Proposed Works

Please describe the proposed works:

ERECTION OF NON-PERMANENT PRE-FABRICATED GARDEN ROOM FOR WHICH NO BUILDING WORKS OR FOUNDATIONS WILL BE NECESSARY,

| · · · · · · · · · · · · · · · · · · · | |
|--|---|
| Description of Proposed Works (continued) | |
| Has the work already started? Yes X No | |
| If Yes, please state when the work was started (DD/MM/YYYY): | (date must be pre-application submission) |
| Has the work already been completed? Yes No | |
| If Yes, please state when the work was completed (DD/MM/YYYY): | (date must be pre-application submission) |
| 4. Site Address Details | 5. Pedestrian and Vehicle Access, Roads and Rights of Way |
| Please provide the full postal address of the application site. | Is a new or altered vehicle access proposed to or from the public highway? Yes X No |
| Unit: number: 1 suffix: | Is a new or altered pedestrian access |
| House name: | proposed to or from the public highway? Yes X No Do the proposals require any diversions, |
| Address 1: ELLIOTT SQUARE | extinguishments and/or creation of public rights of way? |
| Address 2: | If Yes to any questions, please show details on your plans or |
| Address 3: | drawings and state the reference number(s) of the plan(s)/ drawing(s): |
| Town: Lunson | |
| County: | |
| Postcode (optional): NW3 354 | |
| authority about this application? X Yes \square 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 possible: Officer name: \square \square \square \square \square \square \square \square | property or on adjoining properties which are within falling distance of your proposed development? |
| 8. Parking | 9. Authority Employee / Member |
| Will the proposed works affect existing car parking arrangements? Yes No If Yes, please describe: | With respect to the Authority, I am: (a) a member of staff Do any of these (b) an elected member statements apply to you? (c) related to a member of staff Yes (d) related to an elected member Yes If Yes, please provide details of the name, relationship and role |

\$Date:: 2012-07-17 #\$ \$Revision: 4636 \$

| | Existing (where applicable) | Proposed | Not applicable | Don't Know |
|---|---|--|-------------------|---------------|
| Walls | | METAL COATED WITH GREEN PAINT (KUST PROOFED AND INTERNALLY CLAD) NODULAR | | |
| Roof | | MATERIAL NOT KNOWN BUT WITH SEDUMS ROOF COVERING | | |
| Windows | | FRONT ELEVATION AND PART SIDE (EE DRAWING) FULL HEIGHT TILT OR FIXED WINDOWS AND GLASS DOOR - ALL TOUGHENED. | | |
| Doors | | SEE WINDOWS ABOUG AND DRAWING. | | |
| Boundary treatments (e.g. fences, walls) | | ALL UN AFFECTED BY THIS APPLICATION FOR FREF STANDING GARDEA ROOM. | | |
| Vehicle access and hard-standing | | | \boxtimes | |
| Lighting | | GARDEN ROOM - DAVTIME ULE. FOUR SOLKETS PROVIDED (SEE DROWING) FOR FREE STANDING LIGHTS IF NEEDED. | | |
| Others (please specify) | | | Ł | |
| | litional information on submitted pla rences for the plan(s)/drawing(s)/de | an(s)/drawing(s)/design and access statement? Xes | [| No |

| C Town and Country Planning (Develop I certify/The applicant certifies that on the day owner (owner is a person with a freehold interest which the application relates. Signed - Applicant: | pleted, together with the Agricultural Holdings Co ERTIFICATE OF OWNERSHIP - CERTIFICATE A | artificate with this application form |
|--|---|---|
| C Town and Country Planning (Develop I certify/The applicant certifies that on the day owner (owner is a person with a freehold interest which the application relates. Signed - Applicant: | ERTIFICATE OF OWNERSHIP - CERTIFICATE A | artificate with this application form |
| Town and Country Planning (Develop I certify/The applicant certifies that on the day owner (owner is a person with a freehold interest which the application relates. Signed - Applicant: | | ertificate with this application form |
| I certify/The applicant certifies that on the day owner (owner is a person with a freehold interest which the application relates. Signed - Applicant: | | |
| I certify/The applicant certifies that on the day owner (owner is a person with a freehold interest which the application relates. Signed - Applicant: | ment Management Procedure) (England) Order 2 | 010 Certificate under Article 12 |
| which the application relates. Signed - Applicant: | 21 days before the date of this application nobody e | except myself/ the applicant was the |
| Signed - Applicant: | or leasehold interest with at least 7 years left to run) of | any part of the land or building to |
| | Orden de Arrest | D-+- (DD /444 00000 |
| | Or signed - Agent: | Date (DD/MM/YYYY): |
| Ofilium Bufun | | 18-10-2012 |
| Of man Bufun | | |
| Town and Country Planning (Develop I certify/ The applicant certifies that I have/the | ERTIFICATE OF OWNERSHIP - CERTIFICATE B ment Management Procedure) (England) Order 2 e applicant has given the requisite notice to everyon s the owner (owner is a person with a freehold interest owhich this application relates. | e else (as listed below) who, on the day |
| Name of Owner | Address | Date Notice Served |
| | | |
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| Signed - Applicant: | Or signed - Agent: | Date (DD/MM/YYY): |
| | | |
| | | |
| | to find out the names and addresses of the other ow st 7 years left to run) of the land or building, or of a pa | |
| Name of Owner | Address | Date Notice Served |
| - | | |
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| | | |
| Notice of the application has been published i | | ing date (which must not be earlier |
| Notice of the application has been published i (circulating in the area where the land is situat | | ing date (which must not be earlier before the date of the application): |
| | | |
| | | |
| (circulating in the area where the land is situat | red): than 21 days l | before the date of the application): |
| | | |
| (circulating in the area where the land is situat | red): than 21 days l | before the date of the application): |

| Town and Country Planning (Develo | ied) CERTIFICATE OF OWNERSHIP - CERTIFICA pment Management Procedure) (England | | nder Article 12 |
|---|--|--|---|
| date of this application, was the own | s application n to find out the names and addresses of eve er <i>(owner is a person with a freehold interest o</i> application relates, but I have/ the applicant | or leasehold interest with at le | 21 days before the east 7 years left to run) |
| The steps taken were: | ppiredior reaces, our rates are appression | has been unuble to do set | |
| | | | |
| Notice of the application has been published (circulating in the area where the land is situa | in the following newspaper Or ated): th | n the following date (which aan 21 days before the date o | must not be earlier of the application): |
| | | | |
| Signed - Applicant: | Or signed - Agent: | | Date (DD/MM/YYYY): |
| | | | |
| 12. Agricultural Land Declaration | | | |
| Town and Country Planning (Develop Agricultural | AGRICULTURAL LAND DECLARATION oment Management Procedure) (England I Land Declaration - You Must Complete Eith | I) Order 2010 Certificate ur | nder Article 12 |
| (A) None of the land to which the application | | ng. | |
| Signed - Applicant: | Or signed - Agent: | | Date (DD/MM/YYYY): |
| Equine Bifum | | | 18-10-2012 |
| (B) I have/ The applicant has given the requise before the date of this application, was a tena as listed below: | ite notice to every person other than mysel ant of an agricultural holding on all or part o | f/ the applicant who, on the of the land to which this app | day 21 days lication relates, |
| Name of Tenant | Address | | Date Notice Served |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Signed - Applicant: | Or signed - Agent: | | Date (DD/MM/YYYY): |
| | | | |
| | | | |
| 13. Planning Application Requirem Please read the following checklist to make su information required will result in your application | are you have sent all the information in suppration being deemed invalid. It will not be c | port of your proposal. Failur onsidered valid until all info | e to submit all rmation required by |
| the Local Planning Authority has been submit The original and 3 copies of a completed and dated application form: | tted. (The original and 3 copies of a | The correct fee: EIS | |
| The original and 3 copies of a plan which | proposed works fall within a conservation area or | The original and 3 copi | es of the |
| identifies the land to which the application relates drawn to an identified scale and showing the direction of North: | World Heritage Site, or relate to a | completed, dated Own Certificate (A, B, C or D | nership 7 |
| The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: | 1 | The original and 3 copi completed, dated Artic (Agricultural Holdings) | le 12 Certificate |

2

| 14. Declaration | | Period State | | | |
|--|---|--|-----------------------------------|--------------------------------------|--|
| I/we hereby apply for planning permission/cons information. I/we confirm that, to the best of my | ent as described in th /our knowledge, any | is form and the ac facts stated are tru | companying pla ie and accurate | ans/drawings and and any opinions | additional given are the |
| genuine opinions of the person(s) giving them. | | | | | |
| Signed - Applicant: | Or signed - Agent: | | Da | te (DD/MM/YYYY | |
| Duilme Keym | | | 18 | 5-10-2012 | (date cannot be pre-application) |
| 15. Applicant Contact Details | | 16. Agent Co | ontact Detail | s | |
| Telephone numbers | | Telephone num | bers | | 1.00 |
| | Extension | Country code: | N | | Extension number: |
| Country code: National number: | number: | Country code: | National num | ber: | |
| 44 0207 586 7440 | | | | | |
| Country code: Mobile number (optional): | | Country code: | Mobile numbe | er (optional): | |
| 44 07831 822434 | | | | | |
| Country code: Fax number (optional): | | Country code: | Fax number (o | optional): | |
| | | | | | |
| Email address (optional): | | Email address (| optional): | | |
| GUILHERANE, BRAFMAND LEW | VECHERD. OM | | | | |
| CINTER SIGNATION FLU | The long and all all | | | | |
| 17. Site Visit NOTE: SITE HAS | BEEN VISI | TEN. | | | |
| Can the site be seen from a public road, public f | | - | ? Yes | No No | |
| If the planning authority needs to make an appo out a site visit, whom should they contact? (Plea | pintment to carry use select only one) | Agent | Applicat | | different from the oplicant's details) |
| If Other has been selected, please provide: | | | | | |
| Contact name: | | Telephone num | ber: | | 1 |
| | | | | | |
| Email address: | | | | | |