



**Planning Services Camden Town Hall Argyle Street** London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk Telephone : 020 7974 1911 Fax

: 020 7974 5713

For office use Date Payee App. No.

Fee

Application for a Lawful Development Certificate for an Existing use or operation

or activity including those in breach of a planning condition.

Town and Country Planning Act 1990: Section 191 as amended by section 10 of

the Planning and Compensation Act 1991.

Town and Country Planning (Development Management Procedure) (England) Order 2010

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## ablication 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	2. Agent Name and Address					
Title: First name:	Title: MR First name: AOAM					
Last name:	Last name: BEAMISH					
Company (optional): BERRYVILLA LIMITED	Company (optional): CUMNINE TOWN PLANNING LLP					
Unit: House House suffix:	Unit: House House suffix:					
ame:	House name:					
Address 1: CO ROBNT	Address 1: 67 STRATHMORE RDAD					
Address 2:	Address 2:					
Address 3:	Address 3:					
Town:	Town: TEODINGTON					
County:	County: MIODLESEX					
Country:	Country:					
Postcode:	Postcode: TVII 8UH					
	DEGEDVED					
	0 4 OCT 2012					

3. Site Address Details		4. Pre-ar	oplication	Advice		
Please provide the full postal ad	ddress of the application site.	Has assista	nce or prior	advice been s	sought from the local	
House	House	authority a	bout this ap	plication?	🗙 Yes 🗌 No	
House name:					g information about the advice uthority to deal with this	
Address 1: 39-45 KEN	TIGH TOWN ROAD	application	more efficie	ently).		
Address 2:				ntact details a lete as much		
Address 3:		Officer nar				
Town: LONCON			e rose			
County:		Reference:		TO 2011	2812/P MO 2005/0530/P	
Postcode (optional): NW1 &NX				DD/MM/YYY	V).	
Description of location or a gri				on submission ion advice rea		
(must be completed if postcod Easting:	Northing:				BOIRCATE	
Description:						
			RAB	NMEL		
5. Lawful Development	Certificate - Interest In La	nd D	Billin	2017	<u>E</u>	
Please state the applicant's inte		10)	0401	CT 2012		
Owner: X Yes No	Lessee:	Yes No		Occupier:	Yes No	
If Yes to Lessee or Occupier p	lease give details of the owner an	d state whether th	ey have bee	informed i		
Name	Address	Address Have they been inform in writing of the applica Yes No				
If No to all the above, please of	give name and address of anyone	you know who ha				
Name	Name Address		have been	ether they n informed application No	lf No, please explain why not	
		-	Do any of th	iese statemer	nts apply to you?	
If Yes, please provide details of	the name, relationship and role					

the second s	
7. Description of Use, Building Works or Activity	8. Description of Existing Use, Building Works or Activity
Please state for which of these you need a lawful development certificate/building works (you must tick at least one option):	What is the existing site use(s) for which the certificate of lawfulness is being sought? Please fully describe each use and
An existing use: Yes No	state which part of the land the use relates to:
Existing building works: Yes No	LAWFUL COMMENCEMENT OF MATERIAL
An existing use, building work or activity in breach of a condition:	OPERATIONS AMOUNTING TO DEVELOPMENT/
Being a use, building works or activity which is still going on at the date of this application	IMPLEMENTATION OF PLANNING APPLICATION
If Yes to either 'an existing use' or 'an existing use in breach of a condition', please state which one of the Use Classes of the Town and Country Planning (Use Classes) Order 1987 (as amended) the use relates to:	REF. 2005/0530/P PROR TO 23/06/11.
NIA	
9. Grounds For Application For A Lawful Developmen	
Pase state under what grounds is the certificate sought (you must t	ick at least one box):
The use began more than 10 years before the date of this applic	ation.
The use, building works or activity in breach of condition began	
change of use requiring planning permission in the last 10 years The building works (for instance, building or engineering works)	of use not requiring planning permission, and there has not been a s. b) were substantially completed more than four years before the date
<ul> <li>of this application.</li> <li>The use as a single dwelling house began more than four years I</li> </ul>	before the date of this application
from planning permission granted under the Act or by the Gene If the certificate is sought on 'Other' grounds please give details:	ge of use or building work was not development, or that it benefited eral Permitted Development Order).
CERCITFICATE SOUGHT TO CONFIRM THAT THE DEVEN	OPHENT NO ASSOCIATED DEMOLITION WOOMS APPROVED
BY THE MUDMING OF APPEAL REFS. APP/XS210/A/0. PROP TO 23/06/2011 AND AN THEREFORE BE CON	5/1183439 AND APP/X5210/E/05/1190971 WERE COMMENCED
If applicable, please give the reference number of any existing plann notice affecting the application site. Include its date and the number	ing permission, lawful development certificate or enforcement er of any condition being breached:
Reference Number: 2005/0530/P Condition Number:	Date (DD/MM/YYYY): (must be pre application submission) 23/06/2006
ease state why a Lawful Development Certificate should be grante	
FULLY EXPLANED IN ACCOMPANYING COCUMENTA	10N DATED 03/10/2012 PREAMED 1911 CUMMINUE
TOWN MANNING LLP.	
10. Information In Support Of A Lawful Development	
When was the use or activity begun, or the building works substantially completed:	
In the case of an existing use or activity in breach of conditions has t	
	nuance of the development which is the subject of this application. If been ongoing for a period of years, please state exactly when any
NK	
In the case of an existing use of land, has there been any material ch of use of the land since the start of the use for which a certificate is s If Yes please provide details?	ange sought? Yes No
NA	

## 10. Information In Support Of A Lawful Development Certificate (Continued) - Residential Information X No

Does the application for a Certificate relate to a residential use where the number of residential units has changed? If Yes, please complete the following table:

	Topo	osed H	Jousi	ing			Exis		
Market Housing	Number of Bedrooms					Total			
	1	2	3	4+	Unknown		Market Housing	1	
Houses						a	Houses		
Flats & Maisonettes						b	Flats & Maisonettes		
Live-Work Units						C	Live-Work Units		
Cluster Flats						d	Cluster Flats		
Sheltered Housing						e	Sheltered Housing		
Bedsit/Studios			1.00			f	Bedsit/Studios		
Unknown						g	Unknown		
Market Hous	sina Ta	otal (a	+b+c	+d+e	(r + f + a) =	A	Market Hou	sing	
Social Rented	1	2	3	4+	Unknown		Social Rented Housing	1	
lousing Houses						a	Houses	-	
Flats & Maisonettes						b	Flats & Maisonettes		
							Live-Work Units	-	
Live-Work Units						C d	Cluster Flats		
Cluster Flats						e	Sheltered Housing		
Sheltered Housing Bedsit/Studios						f	Bedsit/Studios	-	
							Unknown	-	
Unknown Social Rented House	ing T	atal (a	L b L c	+ d+ a	p + f + q) =	g B	Social Rented Hou	Ising	
	sing re	Jiai (u	+0+0	+u+e		D		ising	
Intermediate Housing	1	2	3	4+	Unknown		Intermediate Housing	1	
Houses						а	Houses		
Flats & Maisonettes						Ь	Flats & Maisonettes		
Live-Work Units						C	Live-Work Units		
Cluster Flats						d	Cluster Flats		
Sheltered Housing						е	Sheltered Housing		
Bedsit/Studios						f	Bedsit/Studios		
Unknown						g	Unknown		
Intermediate Hous	sing To	otal (a	+ b + c	+ <i>d</i> + <i>e</i>	e+f+g) =	С	Intermediate Hou	ising	
Key Worker Housing	1	2	3	4+	Unknown		Key Worker Housing	1	
Houses						а	Houses		
Flats & Maisonettes						Ь	Flats & Maisonettes		
Live-Work Units						C	Live-Work Units		
Cluster Flats						d	Cluster Flats		
Sheltered Housing						е	Sheltered Housing		
Bedsit/Studios						f	Bedsit/Studios		
Unknown						g	Unknown		
Key Worker Housi	ing To	tal (a +	b+c-	+d+e	+f+g) =	D	Key Worker Hou	using	

<b>Existing Housing</b>							
	Number of Bedrooms						
	1	2	3	4+	Unknown		
Aarket Iousing							
louses				0 00	PD	а	
lats & Maisonettes	0		BE	UV	3	Ь	
ive-Work Units		0	. 00	T 201	2	C	
Cluster Flats		0	1 00	1 201	- 13	d	
Sheltered Housing						е	
Bedsit/Studios		-1010. 10. 10. 10.				f	
Jnknown	10					g	
Market Hou	ising To	otal (a	+ b + c	+ d + e	+f+g) =	E	
ocial Rented lousing	1	2	3	4+	Unknown		
louses						а	
lats & Maisonettes						Ь	
ive-Work Units						С	
Cluster Flats						d	
Sheltered Housing						е	
Bedsit/Studios						f	
Jnknown						g	
Social Rented Hou	ising To	otal (a	+ b + c	+ d + e	(+f+g) =	F	
ntermediate lousing	1	2	3	4+	Unknown		
louses						a	
lats & Maisonettes						Ь	
ive-Work Units						C	
Cluster Flats						d	
Sheltered Housing						е	
Bedsit/Studios						f	
Jnknown						g	
Intermediate Hou	using To	otal (a	+ b + c	+d+e	(+f+g) =	G	
(ey Worker lousing	1	2	3	4+	Unknown		
Houses						а	
lats & Maisonettes						b	
ive-Work Units						С	
Cluster Flats						d	
Sheltered Housing						е	
Bedsit/Studios						f	
Jnknown						9	
Key Worker Hou	using T	otal (a	+b+c	+d+e	(r+f+q) =	Н	

**Grand Total** (E + F + G + H) =

WA TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

			and the second second					
information required will result in your application beir the Local Planning Authority has been submitted.	ave sent all the ng deemed inv	information in support of your proposal. Failure to subm alid. It will not be considered valid until all information re n the applicant and therefore sufficient and precise inform	equired by					
The original and 3 copies of a completed dated application form:	×	The original and 3 copies of such evidence verifying the information included in the application as you can provide:	X					
The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:		The correct fee:						
		n this form and the accompanying plans/drawings and acfacts stated are true and accurate and any opinions given Or signed - Agent						
		Adam Beauld						
Date (DD/MM/YYYY): 03/10/2012 (date cannot be pre-application submission) WARNING: The amended section 194 of the 1990 Act provides that it is an offence to furnish false or misleading information or to withhold material information with intent to deceive. Section 193(7) enables the authority to revoke, at any time, a certificate they may have issued as a result of such false or misleading information.								
13. Applicant Contact Details		14. Agent Contact Details						
Telephone numbers         Country code:       National number:         Image: Country code:       Image: Country code:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Email address (optional):       Image: Country code:	Extension number:	14. Agent Contact Details         Telephone numbers         Country code:       National number:         020       89434032         Country code:       Mobile number (optional):         0773       902.0073         Country code:       Fax number (optional):         0773       602.0073         Country code:       Fax number (optional):         020       89778344         Email address (optional):       802.0073         Adam. beamsh @cummack-nplannug.co.uk	Extension number:					
15. Site Visit								
Can the site be seen from a public road, public footpath If the planning authority needs to make an appointmen out a site visit, whom should they contact? ( <i>Please select</i> If Other has been selected, please provide: Contact name:	nt to carry	other public land? Xes No Agent Applicant Other (if differe agent/applican Telephone number:	nt from the t's details)					
Email address:								
		DEGEDVED 0 4 OCT 2012						