

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

Telephone

: 020 7974 1911 : 020 7974 5713

For office use Date

Pavee

App. No.

Householder Application for Planning Permission for works or extension to a dwelling and conservation area consent.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas 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

## blication of applications on planning authority websites

ase note that the information provided on this application form and in supporting documents may be published on the thority's website. If you require any further clarification, please contact the Authority's planning department.

ase complete using block capitals and black ink.

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

<b>Applica</b>	nt Name and Address	2. Agent Name and Address				
le:	MAS. First name: CAITAIONA	Title:	MR First name: /ETEX			
st name:	DEVLIN	Last name:	ottest			
ompany otional):		Company (optional):	1. E. ottery Dip. H. MRTP1			
nit:	House number: +5 House suffix:	] Unit:	House number: //2 House suffix:			
me:		House name:				
ldress 1:	SAVERNAKE ROAD	Address 1:	SOUTHBURY ROAD			
ldress 2:	2) 25	Address 2:				
ldress 3:	u	Address 3:				
wn:	3	] Town:	ENFICIO			
ounty:	LONDON	County:	MIDOK			
ountry:	UK	Country:	UK			
stcode:	NW3 250	Postcode:	ENI IYE			

## . Description of Proposed Works

lease describe the proposed works:

Exection of second floor read Extension

rking proposed work g car parking arra please describe:		9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member statements apply to you? (c) related to a member of staff (d) related to an elected member Yes No  If Yes, please provide details of the name, relationship and role				
laterials cable, please sta	te what materials are to be used externally. In	nclude type, colour and name for each material:				
	Existing (where applicable)	Proposed	Not applicable wouy huod			
	CONSON STOCK FACING BUK WITH REPORICK ARCHIE	es. + pointing.				
		FLAT ASSUMENT				
ows						
5		- GLALED FRENCH DOOMS.				
dary treatments ences, walls)						
le access and standing						
ing			0			
rs se specify)						
	litional information on submitted plan(s)/drav rences for the plan(s)/drawing(s)/design and a		s No			
	or Proposed Demolition Work	tructure(s)?				
s it necessary to (	demolish all or part of the building(s) and or st	N/A.				

\$Date:: 2010-09-10 #\$ \$Revision: 2999 \$

information. Signed - Applicant:	Or signed - Agent:		Date (	(DD/MM/YYYY)	):
	Factor	Eng.	20/	08/2012	(date cannot be pre-application)
16. Applicant Contact Details		17. Agent Co	ontact Details		
Telephone numbers		Telephone num	bers		
Country code: National number:	Extension number:	Country code:	National number	r:	Extension number:
			020 8366		
Country code: Mobile number (optional):		Country code:	Mobile number (	optional):	
via agent			(01958) 25	3549	
Country code: Fax number (optional):		Country code:	Fax number (opt	ional):	
Email address (optional):		Email address (d			
		peter . ot	tany a blever	sonder.a	·vk
18. Site Visit		<u> </u>			
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 appout a site visit, whom should they contact? (Planning)	pointment to carry ease select only one)	Agent	Applicant		different from the
If Other has been selected, please provide:					,
Contact name:	Telephone number:				