

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 Planning Permission. Town and Country Planning Act 1990

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.

1. Applicant Name, Address and Contact Details							
Title: Dr	First name: Ardeshir	Surname:	Mehta				
Company name	Four Trees Surgery						
Street address:	118 Malden Road		Country National Extension Code Number Number				
		Telephone number	er:				
		Mobile number:					
Town/City	London	. Fay numbar					
County:		Fax number:					
Country:	England	Email address:					
Postcode:	NW5 4BY						
Are you an agent a	cting on behalf of the applicant? • Yes (No					
2. Agent Name	, Address and Contact Details						
Title: Mrs	First Name: Natalie	Surname:	Leiwy				
Title. IVII 3	Tist value. Ivataire	Jumame.	Lowy				
Company name:	Natalie Leiwy Architects						
Street address:	6a Deans Court		Country National Extension Code Number Number				
	Brook Avenue	Telephone number	er: +44 7956924536				
	Edgware	Mobile number:					
Town/City	Middlesex	Fax number:					
County:							
Country:	United Kingdom	Email address:					
Postcode:	HA8 9XB	info@natalieleiwy.c	co.uk				
3. Description	of the Proposal						
Please describe the proposed development including any change of use:							
New frontage to existing surgery with installation of ground to first floor platform lift at the rear of the property.							
Has the building, work or change of use already started? Yes No							

Full postal address of the site (including full postcode where available) Description: House: 118 Suffix: Description:	
House 118 Suffive	
Tiouse.	
House name: Four Trees Doctors Surgery	
Street address: Malden Road	
Town/City: London	
County:	
Postcode: NW5 4BY	
Description of location or a grid reference (must be completed if postcode is not known):	
Easting: 528160	
Northing: 185024	
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5. Pre-application Advice	
Has assistance or prior advice been sought from the local authority about this application? Yes No	
6. Pedestrian and Vehicle Access, Roads and Rights of Way	
Is a new or altered vehicle access proposed to or from the public highway? Yes No	
Is a new or altered pedestrian access proposed to or from the public highway?	
Are there any new public roads to be provided within the site? Yes No	
Are there any new public rights of way to be provided within or adjacent to the site? Yes No	
Do the proposals require any diversions/extinguishments and/or creation of rights of way? Yes No	
20 the proposals require any aiversions examigate minority and or discalled refining its or may.	
7. Waste Storage and Collection	
Do the plans incorporate areas to store and aid the collection of waste? • Yes • No	
If Yes, please provide details:	
We are not making any alterations to the existing storage arrangement. At present the rubbish is stored in the store room until collection day.	
Have arrangements been made for the separate storage and collection of recyclable waste? Yes No	
If Yes, please provide details: As existing	
	\equiv
8. Authority Employee/Member	
Maria de la Austria de la Constantina del Constantina de la Constantina del Constantina de la Constant	
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member Do any of these statements apply to you? Yes No	
(a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member	<u> </u>
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Please provide information on the existing and proposed	number of on-site parking spaces:						
Type of vehicle	Existing number	Total proposed (including spaces	Difference in				
Cars	of spaces	retained)	spaces				
Cars 0 0 0 Light goods vehicles/public carrier vehicles 0 0 0							
Motorcycles	0						
Disability spaces	0 0	0	0				
Cycle spaces	0	0	0				
Other (e.g. Bus)	0	0	0				
Short description of Other							
11. Foul Sewage							
Please state how foul sewage is to be disposed of:							
Mains sewer	Package treatment plant	Unknown					
Septic tank	Cess pit	· 	_				
Other	'						
Are you proposing to connect to the existing drainage sy	stem? • Yes	No O Unknown					
If Yes, please include the details of the existing system on	the application drawings and state re	ferences for the plan(s)/drawing(s):					
3 3	11 3	1 (7 3(7					
40.4							
12. Assessment of Flood Risk							
Is the site within an area at risk of flooding? (Refer to the flood zones 2 and 3 and consult Environment Agency starequirements for information as necessary.)							
If Yes, you will need to submit an appropriate flood risk a	ssessment to consider the risk to the p	roposed site.					
	·						
Is your proposal within 20 metres of a watercourse (e.g. ri		Yes No					
Will the proposal increase the flood risk elsewhere?	Yes No						
How will surface water be disposed of?							
Sustainable drainage system Main sewer Pond/lake							
Soakaway Existing watercourse							
13. Biodiversity and Geological Conservation	on						
To assist in answering the following questions refer to the or geological conservation features may be present or ne			od that any important biodiversity				
Having referred to the guidance notes, is there a reasona	ble likelihood of the following being a	ffected adversely or conserved and enha	nced within the application site. OR				
on land adjacent to or near the application site:	510 m.c.m.c.u cr 11.0 renerming cennig u		and approaches one of ex-				
a) Protected and priority species							
Yes, on the development site Yes, o	n land adjacent to or near the propose	ed development	No				
b) Designated sites, important habitats or other biodiversity features							
Yes, on the development site Yes, on land adjacent to or near the proposed development No							
c) Features of geological conservation importance							
Yes, on the development site	n land adjacent to or near the propose	ed development	No				
14. Existing Use							
Please describe the current use of the site:							
Existing doctor surgery							
	No						
Does the proposal involve any of the following?							
If yes, you will need to submit an appropriate contamination assessment with your application.							
Land which is known to be contaminated? Yes No							
Land where contamination is suspected for all or part of the site? Yes No							
A proposed use that would be particularly vulnerable to the presence of contamination? Yes No							

10. Vehicle Parking

15. Trees and Hedges						
Are there trees or hedges on the propose	ed development site?	C Yes	No			
And/or: Are there trees or hedges on land development or might be important as p			could influence the	○ Yes ● No		
	l alongside your applica	tion. Your local planning	authority should make	lanning authority. If a Tree Survey is require clear on its website what the survey shou		
16. Trade Effluent						
Does the proposal involve the need to di	spose of trade effluents	or waste?	○ Yes	No		
17. Residential Units						
Does your proposal include the gain or lo	oss of residential units?	○ Ye	s • No			
18. All Types of Development: I	Non-residential Fl	oorspace				
Does your proposal involve the loss, gain	or change of use of nor	n-residential floorspace?				
19. Employment						
If known, please complete the following	information regarding e	mployees:				
	Full-time	Part-time		Equivalent number of full-time		
Existing employees Proposed employees	7	0 0		0 0		
20						
20. Hours of Opening If known, please state the hours of openin	na for each non-residen	tial use proposed:				
Monday to Frida	-	Saturday		Sunday and Bank Holidays	Not	
	d Time		Ind Time	Start Time End Time	Known	
D1 08:30:00	18:00:00					
21. Site Area						
What is the site area? 125	sq.metres					
22. Industrial or Commercial Pr	ocesses and Mach	inery				
		ed out on the site and the	e end products includi	ing plant, ventilation or air conditioning. F	Please include the	
type of machinery which may be installed N/A	d on site:					
Is the proposal for a waste management development? Yes No						
23. Hazardous Substances						
ls any hazardous waste involved in the pr	oposal?	○ Yes ● No				
24. Site Visit						
Can the site be seen from a public road, p	oublic footpath, bridlew	ay or other public land?		Yes No		
If the planning authority needs to make a	n appointment to carry	out a site visit, whom sho	ould they contact? (Pl	ease select only one)		
○ The agent • The applicant	nt Other perso	on				
25. Certificates (Certificate B)						
Town and County	ry Planning (Develope	Certificate of Ownershi	•	er 2010 Certificate under Article 12		
I certify/The applicant certifies that I have	/the applicant has giver	the requisite notice to e	veryone else (as listed	below) who, on the day 21 days before the		

application relates.

25. Certifi	icates (Certificate	B - continu	ued)						
Notice recipi	<u> </u>							Date notice served	
Name	Dr Dean								
Number:	37	Suffix:							
Street:	Sunningfields Road								
Locality:	Hendon						10/07/2012		
Town:	London								
Postcode:	NW4 4RA								
Title: Dr	First name:	Ardeshir			Surname:	Mehta	a		
Person role:	Applicant	D	eclaration date:	10/07/2012			\boxtimes	Declaration made	
Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 Agricultural Land Declaration - You Must Complete Either A or B (A) None of the land to which the application relates is, or is part of an agricultural holding. (B) I have/The applicant has given the requisite notice to every person other than myself/the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below: If any part of the land is an agricultural holding, of which the applicant is the sole tenant, the applicant should complete part (B) of the form by writing 'sole tenant - not applicable' in the first column of the table below							•		
Title: Dr	First Name:	Ardeshir			Surname:	Mehta	1		
Person role:	Applicant	D	eclaration date:	10/07/2012				Declaration Made	
accompanyir	ration apply for planning perm ng plans/drawings and a			this form and the					