

Application for a non-material amendment following a grant of 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.

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: | My First name: THOMAS |
| Last name: | | Last name: | EVEREST-DINE |
| Company (optional): | LONDON BUILDINGS (AIGHGATE)LA | Company (optional): | CHASSAY STODIO Ltd |
| Unit: | 500 House number: House suffix: | Unit: | House House suffix: |
| House name: | HIGHGATE STUDIOS | House name: | |
| Address 1: | 53-79 HIGHGATE ROAD | Address 1: | 108 PALACE GARDENS TERRACE |
| Address 2: | | Address 2: | |
| Address 3: | | Address 3: | |
| Town: | LONDON | Town: | LONDON |
| County: | | County: | |
| Country: | | Country: | |
| Postcode: | NWS ITL | Postcode: | W8 4RT |

| 3. Site Address Details Please provide the full postal address of the application site. Unit: House number: 30 House A House name: Address 1: HIGHGATE ROAD Address 2: Address 3: Town: LONDON County: Postcode (optional): NWSINT Description of location or a grid reference. (must be completed if postcode is not known): Easting: 528926 Northing: 185437 Description: | 4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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 as possible: Officer name: Mr CHARLES THUALE Reference: Date of advice (DD/MM/YYYY): Details of pre-application advice received: | | | | |
|---|---|--|--|--|--|
| 5. Eligibility Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates? Yes No | | | | | |
| If you have answered No to this question, you cannot If you are not the sole owner, has notification under article 9 of the D If you have answered No to this question, you cannot If you have answered Yes to this question, please give details of pers | MPO been given? Yes No Not Applicable apply to make a non-material amendment. | | | | |
| Person Notified | Address Date of Notification | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 6. Authority Employee / Member | | | | | |
| · · · · · · · · · · · · · · · · · · · | any of these statements apply to you? | | | | |
| (a) a member of staff (b) an elected member | Yes VNo | | | | |
| (c) related to a member of staff (d) related to an elected member | | | | | |
| , ' | | | | | |
| If yes please provide details of the name, relationship and role | | | | | |
| | | | | | |
| I 1 | | | | | |

| 7. Description Of Your Proposal | | | | |
|--|--|--|--|--|
| Please provide a description of the approved developmedate of decision in the sections below. Please also provide | ent as shown on the decision letter, including application reference number and le the original application type: | | | |
| REDEVELOPMENT OF SITE & ERECTION OF 2 BUILDINGS | | | | |
| (2 and 3 STORIES HIGH) PRI | OVIDING 9 SBLF-CONTAINED RESIDENTIAL | | | |
| UNITS AND 59359M OF BUSINGST FLOOR SPACE. | | | | |
| • | | | | |
| | | | | |
| Reference number: | Date of decision (DD/MM/YYYY): | | | |
| 2011/5391/9 | 03/02/2012 | | | |
| What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline') | FOLL | | | |
| For the purpose of calculating fees, which of the following | g best describes the original application type? | | | |
| Householder development: development to an existing dwelling-house or development within its curtilage | | | | |
| Other: anything not covered by the above category | | | | |
| 8. Non-Material Amendment(s) Sought | | | | |
| Please describe the non-material amendment(s) you are seeking to make: | | | | |
| match unit 4, flats 5 & 6 on first floor now mat modifications to flats 7, 8 & 9. Lightwell and g with obscured glass to provide adequate natu | t to the interior layout; Unit 1 has bedrooms moved to first floor to ch flats 2 & 3 below to comply with fire regulations, slight internal lass bricks to commercial boundary wall changed to hopper windows tral cooling – drawing included to show that privacy is maintained. We that we continue to comply with Condition 19. | | | |
| Are you intending to substitute amended plans or drawi | ngs? Ves No | | | |
| If Yes, please complete the following: | | | | |
| Old plan/drawing number(s): | | | | |
| 1102-04,05,06807 (allrev A) 13,14, 15,16,17,18 & 30 | | | | |
| New plan/drawing number(s): | | | | |
| 1102-A-40, 41, 42, 43 (all rev B) 50, 51, 52, 53, 54, 55, 56, 60, 81, 62, 63 & E15 | | | | |
| Please state why you wish to make this amendment: | | | | |
| DESIGN DEVELOPMENT TO COMPLY WITH REGULATIONS | | | | |
| AND DETAILED SUSTAINABILITY RAN | | | | |
| | | | | |

| 9. Application Requirements - Checklist | | | | | |
|--|--|--|--|--|--|
| Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the | | | | | |
| Local Planning Authority has been submitted. | • | | | | |
| The original and 3 copies of a completed and dated application form | : Dyeman(| | | | |
| The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: | by email by phone | | | | |
| The correct fee: | or by phone | | | | |
| 10. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Signed - Applicant: Or signed Agent: Date (DD/MM/YYYY): 03/05/2012 | | | | | |
| 11. Applicant Contact Details | 12. Agent Contact Details | | | | |
| Telephone numbers | Telephone numbers | | | | |
| Country code: National number: Extension number: | Country code: National number: Extension number: 0207 243 (516 | | | | |
| Country code: Mobile number (optional): | Country code: Mobile number (optional): 07713 515773 | | | | |
| Country code: Fax number (optional): | Country code: Fax number (optional): | | | | |
| | | | | | |
| Email address (optional): | Email address (optional): | | | | |
| | Chanas@ Chassay Studio. Com | | | | |
| 13. Site Visit | | | | | |
| 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 appointment to carry out a site visit, whom should they contact? (Please select only one) Applicant Applicant Applicant Other (if different from the agent/applicant's details) | | | | | |
| If Other has been selected, please provide: | — agent/applicant's details/ | | | | |
| Contact name: | Telephone number: | | | | |
| | | | | | |
| | | | | | |