

First name: ANDREW

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

2. Agent Name and Address

Payee App. No. Fee

Application for listed building consent for alterations, extension or demolition of a listed building. 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

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.

1. Applicant Name and Address

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

Title:	First name:	Title:	First name: ANDREW
Last name:		Last name:	BARTLETT
Company	ROYAL COLLEGE OF GENERAL PRACTITIONERS	Company (optional):	TILNEY SHANE LTD.
Unit:	House number: House suffix:	Unit:	House number: 5 House suffix:
House		House name:	
Address 1:	BOW CHURCHYARD	Address 1:	HEATHMANS ROAD
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	LONDON	Town:	LONDON
County:		County:	
Country:		Country:	
Postcode:	EC4M 9DQ	Postcode:	SW6 4TJ
Please des	iption of Proposed Work scribe the proposals to alter, extend or demolish the listed TALLATION OF NEW SECONDA TO FLOOR (PART), 3RD FLOOR	building(s):	ZING (INTERNAL) TO) & 4TH FLOOR (PART)
			\$Date:: 2010-09-10 #\$ \$Revision: 2999 \$

. Description of Proposed Work (continue	ed)	4. Site Address Details Please provide the full postal address of the application site.
		House House
las the work already tarted without consent?	No	Unit: suffix:
		House name:
Yes, please state when the ork was started (DD/MM/YYYY):		Address 1: EUSTON SQUARE
		Address 2:
		Address 3:
	45	
date must be pre-application submission)		Town: LONDON
Has the work been	_/.	County:
completed without consent?	No	Postcode (optional): NWI ZED
		Description of location or a grid reference. (must be completed if postcode is not known):
f Yes, please state the date when the work was completed (DD/MM/YYYY):		Easting: Northing:
		Description:
	0.753	COMPRISING THE PROPERTY (S) ALSO KNOWN AS: 1-9 MEJON STREET,
		1944 EUSTON ROAD & 194-198
date must be pre-application submission)		EUSTON ROAD & 194-196
Service Control France Control		EDSIGN RDAV
If Yes please describe and include the planning apple reference number(s), if known: Description INSTALLATION OF SECONDARY GLAZING (PART) INSTALLATION OF 2N° NEW TRUES & SATELLITE DISH INSTALLATION OF COTY CAMERAS EXT. LIGHTING & INTERCOM INSTALLATION OF EXTERNAL SICNAGE FIT. OUT & REFURBISHMENT OF BUILDING	Reference number 2011 / 4795 / L 2011 / 4784 /P 2017 / 4788 /L	If Yes, please complete the following information about the adv 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: CHÁRLES ROSE Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?
	4901/4	
7. Neighbour and Community Consultation	on	8. Authority Employee / Member
	s No	With respect to the Authority, I am: (a) a member of staff Do any of these statements apply to yo
	2 1/0	(b) an elected member Yes No
		(c) related to a member of staff (d) related to an elected member
the local community about the proposar.		
the local community about the proposal?		(d) related to an elected member

	Existing (where applicable)	and finishes to be used in the building (demolition excluded Proposed	Not applicable	Don't Know
External walls				
Roof covering				
Chimney			V	
Windows	TIMBER STEEL	RETAINED WITH ADDITIONAL SECONDARY GLAZING INTERNALLY		
External doors			Y	
Ceilings			7	
Internal walls				
Floors			4	
Internal doors			4	
Rainwater goods			9	
Boundary treatments (e.g. fences, walls)	5		7	
Vehicle access and hard standing			V	
Lighting			7	
Others (add description)			4	<u></u>
	dditional information on submitted drawing an(s)/drawing(s) references:	gs or plans? Yes No		

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building? Yes No	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include: (you must answer each of the questions)
a) Total demolition of the listed building: Yes No	
b) Demolition of a building within the curtilage of the listed building: Yes No	a) Works to the interior of the building? Yes No No No
c) Demolition of a part of the listed building: Yes No	b) works to the exterior of the building:
If the answer to c) is Yes:	c) Works to any structure or object fixed to the property (or buildings within
i) What is the total volume of the listed building?(cubic metres)	its curtilage) internally or externally? Yes No
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission) Please provide a brief description of the building or part of the building you are proposing to demolish:	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building? Yes No Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know	

14. Certificates				
One C		D, must be completed		orm
	CERTIFICA	TE OF OWNERSHIP - CE	RTIFICATE A	
I certify/The applicant certifies that owner (owner is a person with a free which the application relates.	on the day 21 days	nning (Listed Buildings before the date of this shold interest with at leas	application nobody exc	ent myself/ the applicant was the
Signed - Applicant:		Or signed - Agent	111	Date DD/MM/YYYY):
		A	· Mh	02.04.12
	CEDTIEICAT	E OF OWNERSHIP - CE	DTIFICATE D	
Certificate under Regu I certify/ The applicant certifies that 21 days before the date of this appli left to run) of any part of the land or b	lation 6 of the Plan I have/the applicant cation, was the owne	ning (Listed Buildings at has given the requisite er (owner is a person with	and Conservation Area notice to everyone else	(as listed below) who, on the day
Name of Owner		Address	S	Date Notice Served
Cianad Applicants		Out-out Areas		
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
Neither Certificate A or B car All reasonable steps have be interest or leasehold interest v been unable to do so.	en taken to find out	the names and addresse	es of the other owners (o uilding, or of a part of it	wner is a person with a freehold , but I have/ the applicant has
The steps taken were:				
Name of Owner		Address		Date Notice Served
		8		
Notice of the application has been pu	blished in the follow	ving newspaper	On the following da	te (which must not be earlier
circulating in the area where the land	d is situated):		than 21 days before	the date of the application):
igned - Applicant:		Or signed - Agent:		D-4- DD (444,0000
ighter ripping		Of signed - Agent.		Date DD/MM/YYYY):

Certificate A cannot be issued All reasonable steps have beer date of this application, was th	for this application n taken to find out the name owner (owner is a person	nes and addresses of with a freehold into	IFICATE D d Conservation Areas) Regular of everyone else who, on the day erest or leasehold interest with at l icant has been unable to do so.	121 days hafaya tha
The steps taken were:				
Notice of the application has been pub (circulating in the area where the land i	lished in the following ned is situated):	wspaper	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:	Or sign	ned - Agent:		Date DD/MM/YYYY
		3		Dute DD/WW/TTTT
and to which the application relates and dentified scale and showing the direction 6. Declaration we hereby apply for planning permission formation.		if required (see	I 3 copies of a design and access help text and guidance notes for accompanying plans/drawings	r details):
igned - Applicant:	Or signed - Ager		Date (DD/MM/YY	<u> </u>
		1 Harris	02.012	
7. Applicant Contact Details		18. Agent		
			Contact Details	
elephone numbers	Extension number:	Telephone nu	Contact Details mbers	pre-applicatio Extension
Country code: National number:	number:	Telephone nu	Contact Details mbers National number:	pre-applicatio
Country code: National number: 2031 28 7 4	number:	Telephone nu	mbers National number: 2077 316 946	Extension
Country code: National number: 2031 387 4 Country code: Mobile number (option	number:	Country code Country code Country code Country code	Contact Details mbers National number: 2077 316 946 Mobile number (optional): 7801 545 123	pre-applicatio Extension
Country code: National number: 2031 287 L Country code: Mobile number (optional):	number:	Country code Country code Country code Country code	Contact Details mbers National number: 2077 316 946 Mobile number (optional): 7801 545 123 Fax number (optional):	Extension number:
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Country code: National number: 2031 287 4 Mobile number (optional): Fax number (optional): 2031 387 4 Mail address (optional): 9. Site Visit In the site be seen from a public road, public road	number: hal): bublic footpath, bridleway	Telephone nu Country code Count	Contact Details mbers : National number: 2077 316 946 : Mobile number (optional): 7801 545 123 : Fax number (optional): 2077 363 356 (optional): tetilneushave.co	Extension number:
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Country code: Mobile number (optional):	number: hal): bublic footpath, bridleway an appointment to carry t? (Please select only one)	Telephone nu Country code Count	Contact Details mbers : National number: 2077 316 946 : Mobile number (optional): 7801 545 123 : Fax number (optional): 2077 363 356 (optional): tetilneushave.co. d? Yes No Applicant Other agent.	Extension number: