

Planning Services
Camden Town Hall
Argyle Street
London WC1H 8EQ

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Telephone : 020 7974 1911
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For office use
Date
Payee
App. No.

Fee

**Application for approval of details reserved by condition.
Town and Country Planning Act 1990
Planning (Listed Buildings and Conservation Areas) 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: First name: Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number: Country Code: National Number: Extension Number:

Mobile number:

Fax number:

Email address:

Are you an agent acting on behalf of the applicant? Yes No

2. Agent Name, Address and Contact Details

Title: First Name: Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number: Country Code: National Number: Extension Number:

Mobile number:

Fax number:

Email address:

3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text" value="1"/>	Suffix:	<input type="text"/>
House name:	<input type="text"/>		
Street address:	<input type="text" value="KING'S MEWS"/>		
Town/City:	<input type="text" value="LONDON"/>		
County:	<input type="text"/>		
Postcode:	<input type="text" value="WC1N 2JA"/>		

Description of location or a grid reference (must be completed if postcode is not known):

Easting:	<input type="text" value="530926"/>
Northing:	<input type="text" value="181979"/>

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes No

5. Description of Proposal

Please provide a description of the approved development as shown on the decision letter:

Change of Use from Office Use (Class B1) at Ground Floor, and Hair Loss Treatment Centre (Class D1) at 1st Floor Level, to Single Dwelling House (Class C3), including the Erection of a Rear Extension and Associated Roof Terrace at 1st Floor Level.

Application reference number:	<input type="text" value="2011/1302/P"/>	Date of decision:	<input type="text" value="22/09/2011"/>
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Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started? Yes No

6. Discharge of Condition(s)

Please provide a full description and/or list of the materials/details that are being submitted for approval:

Refer to detail drawing by FT Architects Ltd no. 200_07_01, which shows the parapet wall extended to 1.8mm high, finished with painted render to match existing, and topped with a coping stone, to match the main roof.

7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition?

Yes No

8. 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)

The agent The applicant Other person

9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.



Date