

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

Payee App. No. Fee

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning 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

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

lease complete using block capitals and black ink.

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

 Applicant Name and Addr 	ess	2. Agent	Name and	d Address		
itle: MR+MRS First name:	JONATHAN + SONIA	Title:	MR	First name:	ROBERT	
.ast name: WEETMAN		Last name:	DY	E		
Company optional):		Company (optional):	ROBER	T DYE A	ASSOCIATES	
Jnit: House number:	House suffix:	Unit:		House number:	House suffix:	
House BELSIZE A	VENUE	House name:	LINTO	N House	E	
\ddress 1:		Address 1:	29-3	51 HIGH	GATE ROAD	
\ddress 2:		Address 2:				
\ddress 3:		Address 3:				
own: LONDON		Town:	LONI	DON		
County:		County:				
Country:		Country:				
ostcode: NW3 4AU		Postcode:	Nw5	IRS		

3. Description of Proposed Works

'lease describe the proposed works:

ERECTION OF SINGLE STOREY REAR EXTENSION TO REPLACE EXISTING SINGLE STOREY SIDE REAR EXTENSYON.

	(leter weet because application submission)
Yes, please state when the work was started (DD/MM/YYYY): las the work already been completed? Yes	(date must be pre-application submission)
las the work already been completed?	
Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)
h Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way
lease provide the full postal address of the application site.	Is a new or altered vehicle access
Jnit: House House suffix:	proposed to or from the public highway? Yes No
louse	Is a new or altered pedestrian access proposed to or from the public highway? Yes No
name:	Do the proposals require any diversions,
Address 1: BELSIZE AVENUE	extinguishments and/or creation of public rights of way?
Address 2:	If Yes to any questions, please show details on your plans or
vddress 3:	drawings and state the reference number(s) of the plan(s)/drawing(s):
own: LONDON	
lounty:	
Postcode NW3 4AU	
optional):	
Yes, please complete the following information about the advice ou were given. (This will help the authority to deal with this	are within falling distance of your proposed development? If Yes, please mark their position on a scaled
Yes, please complete the following information about the advice ou were given. (This will help the authority to deal with this pplication more efficiently). lease tick if the full contact details are not nown, and then complete as much possible: Officer name:	I V I Ma
ou were given. (This will help the authority to deal with this pplication more efficiently). lease tick if the full contact details are not nown, and then complete as much possible: Officer name:	development? Yes V No If Yes, please mark their position on a scaled
ou were given. (This will help the authority to deal with this pplication more efficiently). lease tick if the full contact details are not nown, and then complete as much possible:	development? Yes V No If Yes, please mark their position on a scaled

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Nalls	BRICKWORK WHITE PAINTED BRICKWORK WHITE PAINTED TIMBER CLADDING	WHITE PAINTED BRICKWORK		
Roof	MAIN HOUSE- CONCRETE TILED ROOF REAR SIDE EXTENSION - ASPHALT (GRAY).	GREY EPDM ROOF		
Nindows	WHITE PAINTED TIMBER FRAMES	FIXED CLEAR GLAZED SKYLIGHT		
Doors	UPVC (WHITE) DOOR	POWDER-COATED GLAZED SLIDING METAL DOOR TO REAR IN GRAY FRAMES		
3oundary treatments e.g. fences, walls)	BRICK WALL WITH TRELLIS ON TOP AT REAR GARDEN	AS EXISTING, MADE GOOD.		
/ehicle access and nard-standing				
_ighting		_	d	
Others please specify)		GREY POWDER-COAT METAL FASCIA ABOVE GLAZED DOORS		
Yes, please state refer BOUND AS PLAN SITE PHOTOS	itional information on submitted plan(s)/drawing(s) rences for the plan(s)/drawing(s)/design and access NNING APPLICATION SUBMISSION - 4 BELSI - DESIGNE ACCESS STATEMENT (S: EXODO, EXIOD, 00/, 002, 003, EX 0(0, 0)) S: PAIOO, PAOOI, 002, 003, PAOOO, 0(1, 0)	Statement: RE AVENUE, NWY 4AU. DECEMBER 2011		No No

One Certificate A, B, C, or D, must be completed, together with the Agricultural Holdings Certificate with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the wner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land or building to hich the application relates. Date (DD/MM/YYYY): Or signed - Agent: igned - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 1 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years ft to run) of any part of the land or building to which this application relates. **Date Notice Served** Name of Owner Date (DD/MM/YYYY): Or signed - Agent: igned - Applicant: **CERTIFICATE OF OWNERSHIP - CERTIFICATE C** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 :ertify/The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of the land or building, or of a part of it, but I have/the applicant has been unable to do so. he steps taken were: **Date Notice Served** Name of Owner Address lotice of the application has been published in the following newspaper On the following date (which must not be earlier circulating in the area where the land is situated): than 21 days before the date of the application): igned - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

11. Ownership Certificates

11. Ownership Certificates (cor	ntinued)		
Town and Country Planning (Do I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been date of this application, was the	CERTIFICATE OF OWNERSHIP - CER evelopment Management Procedure) (E	ngland) Order 2010 Certificate of everyone else who, on the deterest or leasehold interest with a	ay 21 days before the teast 7 years left to run)
пте мене.			
No. 1 Colonia de la colonia de	inhand in the fellowing powers are	On the following date (whi	ch must not be earlier
Notice of the application has been publ (circulating in the area where the land is	situated):	On the following date (which than 21 days before the date	e of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
зідней - Арріїсані.	Of Signed - Agent.		
Āgricu	AGRICULTURAL LAND DECLARA velopment Management Procedure) (En ultural Land Declaration - You Must Comple cation relates is, or is part of, an agricultural	gland) Order 2010 Certificate te Either A or B	under Article 12
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
	RIDM	1	22/12/11
(B) I have/ The applicant has given the rebefore the date of this application, was as listed below:	equisite notice to every person other than i a tenant of an agricultural holding on all or	myself/ the applicant who, on the part of the land to which this a	ne day 21 days oplication relates,
Name of Tenant	Address		Date Notice Served
			4, 4
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
information required will result in your a	lke sure you have sent all the information ir pplication being deemed invalid. It will not	n support of your proposal. Failu t be considered valid until all inf	ure to submit all formation required by
the Local Planning Authority has been su The original and 3 copies of a completed and dated application form:	The original and 3 copies of a design and access statement if	The correct fee:	4
The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	proposed works fall within a	The original and 3 concompleted, dated Ow Certificate (A, B, C or I	nership
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	o 	The original and 3 cop completed, dated Art (Agricultural Holding:	icle 12 Certificate

Veclaration we hereby apply for planning permission/consent formation. igned - Applicant:	nt as described in th Or signed - Agent:	his form and the accompanying plans/drawings and additional Date (DD/MM/YYYY):
ідпец - Арріїсані.	Of signed - Agent.	22/12/11 (date cannot be pre-application)
5. Applicant Contact Details		16. Agent Contact Details
elephone numbers		Telephone numbers
Country code: National number:	Extension number:	Country code: National number: D044 207 2679388 Extension number:
Country code: Mobile number (optional):		Country code: Mobile number (optional):
iountry code: Fax number (optional):	_	Country code: Fax number (optional):
mail address (optional):		Email address (optional):
		info@robertdye.com
7. Site Visit		
an the site be seen from a public road, public foo	tpath, bridleway or	r other public land? 📝 Yes 🔲 No
the planning authority needs to make an appoint a site visit, whom should they contact? (Please	itment to carry select only one)	Agent Applicant Other (if different from the agent/applicant's details)
Other has been selected, please provide:		
ontact name:		Telephone number:
KAORI IUCHI		207 267 9388
mail address: info e volvert dy	e.com	