

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

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

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. 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			
Title:	First name:		
Last name:			
Company (optional):	FAZE INVESTMENTS		
Unit:	House number: House suffix:		
House name:			
Address 1:	C/O RINGLES		
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

2. Agent Name and Address				
Title:	MISS First name: WASAR			
Last name:	SHABANA			
Company (optional):	RINGLEY CHARTERED SURVEYORS			
Unit:	House number: House suffix:			
House name:	RINGLEY HOUSE			
Address 1:	349 ROYAL COLLEGE STREET			
Address 2:				
Address 3:				
Town:	LONDON			
County:				
Country:				
Postcode:	NW1-9QS			

3: Site Address Details Please provide the full postal address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local			
House House	authority about this application?			
House AROEN AT	If Yes, please complete the following information about the advice			
name:	you were given. (This will help the authority to deal with this application more efficiently).			
TRIMER ROOSE	Please tick if the full contact details are not known, and then complete as much as possible:			
Address 2: 76-84 FORTESS ROAD				
Address 3:	Officer name:			
Town: London	Reference:			
County:	CLS/CSO1/1685.824			
Postcode (optional): NWS-ZHH	Date (DD/MM/YYYY):			
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?			
Easting: Northing:	TO COMPLETE AND RETURN AN			
Description:	APPLICATION FOR MAPPROVAL OF			
GOCH AT PALMEN HUSE	DETAILS.			
BOCK AT PALMER HOSE				
Please provide a description of the approved development as shown and date of decision in the sections below: Reference number: 2003 0272 P Date of decision: Please state the condition number(s) to which this application related cycle fraction The lease state the condition number of the sample of decision: Please state the condition number(s) to which this application related cycle fraction The lease state the condition number of the sample of decision: Please state the condition number of the sample of the sample of decision: Please state the condition number of the sample of decision: Please state the c	8. 9. 10. 2004 (date must be pre-application submission) Yes No (date must be pre-application submission)			
6. Discharge Of Condition Please provide a full description and/or list of the materials/details that are being submitted for approval: See abouted. Wetal beyon.				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:				

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed into the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:			
The correct fee:				
9. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applicant: Date (DD/MM/YYYY): (date cannot be pre-application)	or signed - Agent:			
10. Applicant Contact Details	11. Agent Contact Details			
Telephone numbers Country code: National number: Extension number:	Telephone numbers Extension Country code: National number: number:			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
Email address (optional):	Email address (optional):			
	SHABANA. KAUSARO RINGLEY. CO.UK			
12. Site Visit	7			
Can the site be seen from a public road, public footpath, bridleway or	r other public land? No			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Agent Applicant Other (if different find agent/applicant's different find agent find				
If Other has been selected, please provide: Contact name:	Telephone number:			
SHARANA KASAR	0707478 1987			

Email address: SHABANA WANSAR GRINGLEY CO.NC