

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk

Telephone Fax

: 020 7974 1911 : 020 7974 5713 For office use

Date

2. Agent Name and Address

Pavee App. No.

First name:

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

First name: SRUCE

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

N'LALLUM

Title:

Last name:

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

Title:

Last name:

Company (optional): THE SOURCE CLIMIC LIMITED	Company (optional):
Unit: House number: House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: PERCY STREET	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: LONDON	Town:
County:	County:
Country:	Country:
Postcode: WIT IOU	Postcode:
3. Description of Proposed Work Please describe the proposals to alter, extend or demolish the listed	building(s):
- Build 3 STUD WALLS TO LAGATE OFFICE	2 TREATMENT ROOMS, WAITING ROOM AND
- STUD WALLS ARE TEMPORARY AND STRUCTURE	REMOVABLE WITHOUT IMPACT ON EXISTING
- PREMISES TO DE RETURNED TO E APPLICANTS LEASE (JULY 2014)	CISTING CONDITION AT THE END OF
	\$Date:: 2010-09-10 #\$ \$Revisjon: 2999 \$

3. Description of Proposed Work (continued)	4. Site Address Details
	Please provide the full postal address of the application site.
Has the work already started without consent? Yes No	Unit: - House number: 17 House suffix: -
started without consent:	House 1/2
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1: PENCY STREET
	Address 2:
	Address 3:
(date must be pre-application submission)	Town: LON/OON
Has the work been	County:
completed without consent? Yes No	Postcode (optional): WIT VOU Description of location or a grid reference.
If Yes, please state the date when the work was completed (DD/MM/YYYY):	(must be completed if postcode is not known): Easting: Northing:
	Description:
30-08-5011	FIRST FLOOR OF LATE 18TH CENTURY
	TERMICED HOUSE
(date must be pre-application submission)	1 CHARLES ALONGE
Are there any current applications, previous proposals or demolitions for the site? If Yes please describe and include the planning application reference number(s), if known: Description Reference number PREVIOUS PROPOSAL FOR LHANGE OF 2011 USE FROM IST TO BILDI (DUAL 4231 USE)	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: CAROS NARTIN Reference: LA 2011 Lang 04 3 11 Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received? ENQUINK RELARDING CHANGE OF USE ONLY AS I WAS UNAWARE OF THE CALLDINGS LISTED STATUS, THIS VAS NOT TENTIONED.
7. Neighbour and Community Consultation Have you consulted your neighbours or the local community about the proposal? If Yes, please provide details:	8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member
	If Yes, please provide details of the name, relationship and role

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls				
Roof covering				
Chimney				
Windows	NO CHANGE TO IST FLOOR WINDOWS			
External doors				
Ceilings	NO CHANGE TO EXISTING			
Internal walls	OPEM PLAN	CONSTRUCTION OF LIGHT STUD WALLS: WOOD FRAME WITH SOUND PRODEING BOARD		
Floors	NO CHANGE TO EXISTING			
Internal doors	NO INTERNAL DOOR	328" x 6' 6" 44 mm HALF HOUR FIRECHELK DOORS		
Rainwater goods			d	
Boundary treatments (e.g. fences, walls)			Ø	
Vehicle access and hard standing			d	
Lighting	NO CHANGE TO EXISTING			
Others (add description)				
	itional information on submitted drawings or plan	ns? Yes No		
IF Yes, please state plan - FLOOR PLAN-P - FLOOR PLAN-P - SELTION 1 - E	CRION TO WORKS. POF SECTION 2-PO EXISTING. POF SECTION 2-PO EXISTING. POF SECTION 3-E	PHOTOSHEET 1-P PRIOR TO WORKS POF PHOTOSHEET 2-B PRIOR TO WORKS POF PHOTOSHEET 2-B PRIOR TO WORKS POF	MISTIE	Aco.

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:
a) Total demolition of the listed building: Yes No	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building: Yes No	a) Works to the interior of the building? Yes No
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No
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)? Yes No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	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
Please provide a brief description of the building or part of the building you are proposing to demolish:	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? 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	

A Cartificate				
14. Certificates	tificate A.B.C.o.	r D. must be completed	with this application form	
One Cer		TE OF OWNERSHIP - CE		
Certificate under Regula	tion 6 of the Plan	nning (Listed Buildings	and Conservation Areas) Re	gulations 1990
I certify/The applicant certifies that or owner (owner is a person with a freeho	n the day 21 days	before the date of this	application nobody except n	nyself/ the applicant was the
which the application relates.	id interest of rease	noid interest with at leas	it i years left to run, or any pe	art of the land of building t
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
		TE OF OWNERSHIP - CE		
Certificate under Regula I certify/ The applicant certifies that I h	tion 6 of the Plan	ning (Listed Buildings a	and Conservation Areas) Re	gulations 1990
21 days before the date of this applicat	tion, was the owner	er (owner is a person with	a freehold interest or leasehold	d interest with at least 7 years
eft to run) of any part of the land or bui	lding to which thi	s application relates.		
Name of Owner		Address	S	Date Notice Served
0-00 V	40 PEANI	- + COUTTS LTI	D, 300 FLOOR	211.01.01
PERCY VILLAGE LINITED	9 WHITE L	- + COUTTS LTI	1 11 900	24/10/2011
		The state of the s	M M 11 10	
	×			
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
166				
/				24-10-2011
certify/ The applicant certifies that: Neither Certificate A or B can b All reasonable steps have beer interest or leasehold interest wit been unable to do so.	taken to find out	the names and addresse	es of the other owners (owner uilding, or of a part of it , but i	is a person with a freehold have/ the applicant has
The steps taken were:				
Name of Owner		Address		Date Notice Served
name or owner		Address		Date Notice Served
				THE TANK LIVER IN
Notice of the application has been pub	lished in the follo	wing newspaper	On the following date (w	hich must not be earlier
circulating in the area where the land	is situated):		than 21 days before the o	date of the application):
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):

14. Certificates (continued)			
CERTIFICAT Certificate under Regulation 6 of the Plan	TE OF OWNERSHIP - CERT		tions 1990
I certify/ The applicant certifies that:	ilinig (cisted buildings an	a conservation Areas, negular	10113 1990
 Certificate A cannot be issued for this application 			24 1 1 6 1
 All reasonable steps have been taken to find out date of this application, was the owner (owner is 	a person with a freehold into	erest or leasehold interest with at le	east 7 years left to run)
of any part of the land to which this application	relates, but I have/ the appl	icant has been unable to do so.	
The steps taken were:			
Note that the second se		0 1 6 1 1 1 1 1 1 1 1 1 1 1 1	
Notice of the application has been published in the follo (circulating in the area where the land is situated):	wing newspaper	On the following date (which than 21 days before the date of	of the application):
Cinnal Androne	0-1		D-1- DD 444400000
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):
15. Planning Application Requirements - Che			
Please read the following checklist to make sure you have			
information required will result in your application being	deemed invalid. It will not	be considered valid until all info	ormation required by
the Local Planning Authority has been submitted.	The original an	d 3 copies of other plans and dra	awings or
The original and 3 copies of a completed and dated application form:		cessary to describe the subject o	
		d 3 copies of the completed date	
The original and 3 copies of a plan which identifies the land to which the application relates and drawn to an		tificate (A, B, C, or D - as applicat	
identified scale and showing the direction of North:	if required (see	d 3 copies of a design and access help text and guidance notes fo	s statement, or details):
	E J. C. L. H. MARCHANNEL TAKET		Albertige hattill
16. Declaration			
	escribed in this form and the	e accompanying plans/drawings	and additional
I/we hereby apply for planning permission/consent as de information.	escribed in this form and the	e accompanying plans/drawings Date (DD/MM/Y)	
I/we hereby apply for planning permission/consent as de information.		Date (DD/MM/Y)	YYY): (date cannot be
I/we hereby apply for planning permission/consent as de information.			YYY):
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign	ed - Agent:	Date (DD/MM/Y) 24/10/20	YYY): (date cannot be
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign Or Applicant Contact Details	ed - Agent:	Date (DD/MM/Y) 24/10/20 Contact Details	YYY): (date cannot be
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers	18. Agent	Date (DD/MM/Y) 24/10/20 Contact Details	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers	ed - Agent:	Date (DD/MM/Y) 24/10/20 Contact Details umbers	YYY): (date cannot be
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number:	18. Agent Telephone n	Date (DD/MM/Y) 24/10/20 Contact Details umbers	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number:	Extension number: 18. Agent Telephone n Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number:	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44 Country code: Mobile number (optional):	Extension number: Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number:	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44 Country code: Mobile number (optional): +44 O7719 340 857	Extension number: Country cod	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional):	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44 Country code: Mobile number (optional):	Extension number: Country cod	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional):	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44	Extension number: Country cod Country cod Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional):	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44 Country code: Mobile number (optional): +44 O7719 340 857	Extension number: Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional):	YYYY): (date cannot be pre-application)
17. Applicant Contact Details Telephone numbers Country code: National number: +44	Extension number: Country cod Country cod Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional):	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: +44 O20 7436 8876 Country code: Mobile number (optional):	Extension number: Country cod Country cod Country cod	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional):	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: +44 O20 7436 8876 Country code: Mobile number (optional): +44 O7719 340 857 Country code: Fax number (optional): Email address (optional):	Extension number: Country cod Country cod Email addres	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional):	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: +44	Extension number: Country cod Country cod Email address bridleway or other public la	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional):	YYYY): (date cannot be pre-application)
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: +44 O20 7436 8876 Country code: Mobile number (optional):	Extension number: Country cod Country cod Email address bridleway or other public late to carry	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional): Other	Extension number:
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: +44 O20 7436 8876 Country code: Mobile number (optional): +44 O7719 340 857 Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select of the planning authority needs to make an appointment out a site visit.	Extension number: Country cod Country cod Email address bridleway or other public late to carry	Date (DD/MM/Y) 24/10/10 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional): Other	YYYY): O((ate cannot be pre-application)) Extension number:
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign	Extension number: Country cod Country cod Country cod Email addres bridleway or other public latto carry only one) Agent	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional): and? Yes No Applicant Other agen	Extension number:
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign	Extension number: Country cod Country cod Country cod Email addres bridleway or other public latto carry only one) Telephone no	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional): and? Yes No Applicant Other agen umber:	Extension number:
I/we hereby apply for planning permission/consent as de information. Signed - Applicant: Or sign	Extension number: Country cod Country cod Country cod Email addres bridleway or other public latto carry only one) Telephone no	Date (DD/MM/Y) 24/10/20 Contact Details umbers e: National number: e: Mobile number (optional): e: Fax number (optional): ss (optional): and? Yes No Applicant Other agen	Extension number: