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

: 020 7974 1911 Telephone Fax

: 020 7974 5713

For office use

Date Payee App. No.

2. Agent Name and Address

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

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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.

rue. Procuante.	Title. ///K That Harle. D/K////M/V			
Last name: CROOK	Last name: MAGUIRE			
Company (optional):	Company (optional): SACKS MAGUIRE ARCHITECTS			
Unit: House / House suffix:	Unit: House number: 155 House suffix:			
House name:	House name:			
Address 1: HAMPSTEAD SQUARE	Address 1: REGENTS PARK ROAD			
Address 2: LONDON	Address 2:			
Address 3:	Address 3:			
Town:	Town: LONDON			
County:	County:			
Country:	Country:			
Postcode: NW3 IAB	Postcode: NWI 8BB			
3. Description of Proposed Works Please describe the proposed works: NEW SINGLE GLAZED DOORS TO REAR GARDEN LIGHTWEAL IN LIEU OF EXISTING KITCHEN WINDOW & NEW KITCHEN				

3. Description of Proposed Works (continued)				
Has the work already started? Yes No				
If Yes, please state when the work was started (DD/MM/YYYY):	(date must be pre-application submission)			
Has the work already been completed?				
If Yes, please state when the work was completed (DD/MM/YYYY):	(date must be pre-application submission)			
4. Site Address Details	5. Pedestrian and Vehicle Access, Roads and Rights of Way			
Please provide the full postal address of the application site.	Is a new or altered vehicle access			
Unit: House l House suffix:	proposed to or from the public highway? Yes No Is a new or altered pedestrian access			
House name:	proposed to or from the public highway? Yes Vo			
Address 1: HAMPSTEAD SQUARE	Do the proposals require any diversions, extinguishments and/or creation of public rights of way? Yes No			
Address 2:	If Yes to any questions, please show details on your plans or			
Address 3:	drawings and state the reference number(s) of the plan(s)/ drawing(s):			
Town: LONDON				
County:				
Postcode (optional): NW3 IAB				
6. Pre-application Advice	7. Trees and Hedges			
Has assistance or prior advice been sought from the local	Are there any trees or hedges on your own			
authority about this application?	property or on adjoining properties which			
If Yes, please complete the following information about the advice	are within falling distance of your proposed Yes No			
you were given. (This will help the authority to deal with this	If Yes, please mark their position on a scaled			
application more efficiently). Please tick if the full contact details are not	plan and state the reference number of any plans or drawings:			
known, and then complete as much possible:	NOT RELEVANT			
Officer name:				
<u></u>				
Reference:	Will any trees or hedges need			
	to be removed or pruned in			
Date (DD MM YYYY):	order to carry out your proposal? Yes No			
(must be pre-application submission) Details of the pre-application advice received:	If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/			
Details of the pre-application advice received.	drawing(s) and indicate the scale.			
]]			
8. Parking Will the proposed works affect	9. Authority Employee / Member With respect to the Authority, I am:			
existing car parking arrangements? Yes No	(a) a member of staff Do any of these			
If Yes, please describe:	(b) an elected member statements apply to you? (c) related to a member of staff			
	(c) related to a member of staff (d) related to an elected member			
[If Yes, please provide details of the name, relationship and role			
1				
	11			

	Existing (where applicable)	Proposed	Not applicable	Don't Know
Walls	BRICKWORK & RENDERED BRICKWORK	BRICKWORK & RENDERED BRICKWO TO MATTH EXISTING		
Roof			u	
Windows				
Doors	PAINTED HARDWOOD 8 GLASS	PRINTED HARDWOOL & GLASS		
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard-standing			Image: control of the	
Lighting				
Others (please specify)				
f Yes, please state refer	tional information on submitted plan(s)/drawing(s), ences for the plan(s)/drawing(s)/design and access O(, BD 510 02, E	statement:		No 1

 Ownership Certificates One Certificate A, B, C, or D, must 	he completed to	ether with the Acricults	ırai Holdinas Certifica	te with this annlication form
	CERTIFICAT	E OF OWNERSHIP - CERT	TIFICATE A	
Town and Country Planning (I certify/ The applicant certifies that on	Development Man	agement Procedure) (En	ngland) Order 2010 Ce	ertificate under Article 12
owner (owner is a person with a freehole	d interest or leasehol	'd interest with at least 7 ye	ars left to run) of any pai	rt of the land or building to
which the application relates.		Or signed - Agent:	1	Date (DD/MM/YYYY):
Signed - Applicant:		Or signed - argent.	- ///.	
		1/all	Mym	06/10/2011
	CERTIFICAT	E OF OWNERSHIP - CERT	TIFICATE B	
Town and Country Planning (I I certify/ The applicant certifies that I 21 days before the date of this applica left to run) of any part of the land or bu	have/the applicant tion, was the owne	has given the requisite no r (owner is a person with a	otice to everyone else (a	as listed below) who, on the day
Name of Owner	inding to which this	Address		Date Notice Served
***************************************				, , ,
			mby	
		and the same of th		
		<u> </u>		
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
				-8
certify/ The applicant certifies that: Neither Certificate A or B can lead of the All reasonable steps have bee interest or leasehold interest with been unable to do so. The steps taken were:	n taken to find out	the names and addresses	of the other owners <i>(on</i> Iding, or of a part of it , I	vner is a person with a freehold but I have/ the applicant has
Name of Owner		Address		Date Notice Served
			· · · · · · · · · · · · · · · · · · ·	
		/		
The state of the s				
			<u> </u>	
Notice of the application has been pu (circulating in the area where the land	blished in the follov l is situated):	ving newspaper		e (which must not be earlier he date of the application):
Cincard Annull Contra				I
Signed - Applycapt:		Or signed - Agent:		Date (DD/MM/YYYY):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):

	11. Ownership Certificates (continue				
1	Town and Country Planning (Develops certify/ The applicant certifies that:	_		under Article 12	
	 Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 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 left to run) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. 				
Γ	The steps taken were:				
, , ,	Notice of the application has been published in (circulating in the area where the land is situate	ofollowing newspaper	On the following date (which than 21 days before the date	must not be earlier of the application):	
L	Circuit Assirtant			D-1- (DD (MM 10000)	
ſ	Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):	
٢					
12. Agricultural Land Declaration AGRICULTURAL LAND DECLARATION Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 Agricultural Land Declaration - You Must Complete Either A or B (A) None of the land to which the application relates is, or is part of, an agricultural holding.					
	Signed - Applicant;	Or signed Agent:	11.1	Date (DD/MM/YYYY):	
		1 gun	May in	06/10/2011	
J	(B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below:				
	Name of Tenant	Address		Date Notice Served	
		<u>, , , , , , , , , , , , , , , , , , , </u>			
				MA PORTING	
ŀ					
Γ	Signed - Applicant.	Or signed - Agent:		Date (DD/MM/YYYY):	
13. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by					
Т	he Local Planning Authority has been submitte he original and 3 copies of a ompleted and dated application form:	The original and 3 copies of a design and access statement if	The correct fee:		
T ic re a	he original and 3 copies of a plan which dentifies the land to which the application elates drawn to an identified scale nd showing the direction of North:	proposed works fall within a conservation area or World Heritage Site, or relate to a Listed Building:	The original and 3 cop completed, dated Owi Certificate (A, B, C or D	nership 🗂 🛚	
a	he original and 3 copies of other plans nd drawings or information necessary to escribe the subject of the application:		The original and 3 cop completed, dated Artic	cle 12 Certificate 🦳	

14. Declaration				
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional				
information. Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):			
1/an	in // (date cannot be pre-application)			
15. Applicant Contact Details	16. Agent Contact Details			
Telephone numbers	Telephone numbers			
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Country code: National number: 144 ORO 77229238 Country code: Mobile number (optional): 144 C7956963938 Country code: Fax number (optional): Email address (optional): Camian@ Sacksmaguire. Com			
17. 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) Agent Applicant Other (if different from the agent/applicant's details)				
If Other has been selected, please provide:				
Contact name:	Telephone number:			
DAMIAN MAGUIRE	02077229298			
Email address: damian@ Sacksma	quire.com			