

Planning Services Camden Town Hall Argyle Street

Telephone

Email (enquiries only): env.devcon@camden.gov.uk : 020 7974 1911

Date Payee App. No.

For office use

Fee

SDate: 2010-09-10 #\$ \$Revision: 2999 \$

London WCTH 8EQ

: 020 7974 5713,

Application for meted 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

Fax

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		2. Agent Name and Address			
Title:	First name:	Title:	MK First name: DAVVD		
Last name:		Last name:	RUSSEL		
Company (optional):	CHARLES WELLS PUB COLTS	Company (optional):	DAVID RUSSELL ASSOCIATES		
Unit:	House House suffix:	Unit:	House House suffix:		
House name:	LAKEVIEW HOUSE	House name:			
Address 1:	PRIORY BUSINESS PARK	Address 1:	11 EAST MOUNT		
Address 2:	FRASHR ROAD	Address 2:	WHEATHAMPSTEAD		
Address 3:		Address 3:			
Town:	BEDFORD	Town:	STALBANS		
County:	BLOKERDSHIRE	County:	HORTGRD SHIRE		
Country:	uk	Country:	uK		
Postcode:	MK44 3WH	Postcode:	ALA EBS		
3. Description of Proposed Work Please describe the proposals to alter, extend or demolish the listed building(s): ADD COWL TO APPROVED CHIMNEY ENLARCHEMENT USTED BUILDING CONSENT APPLICATION TO ACCOMPANY PLANNING EXPLICATION FOR NON-MATERIAL AMENDMENT REPERENCE: 2011/4821/P DEGETYE 10 OCT 2011					

	14. Certificates (continued)			
CERTIFICATE OF OWNERSHIP - CERTIFICATE D Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that: 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.				
The steps taken were:				
Notice of the application has been published in the folk (circulating in the area where the land is situated):	On the following date (which must not be than 21 days before the date of the application)			
Signed - Applicant:	Or signed - Agent:	Date DD/MM	M/YYYY):	
15. 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 the Local Planning Authority has been submitted. The original and 3 copies of a completed and dated application form: The original and 3 copies of the plans and drawings or information necessary to describe the subject of the application: The original and 3 copies of the completed dated Ownership Certificate (A, B, C, or D - as applicable): The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details):				
16. 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: Or sign				
Signed - Applicant: Or sign	W CHARLES	WEUS (date of	cannot be	
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17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): 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 If Other has been selected, please provide:	Extension number: Telephone Country count	MEUS TO VO 2011 (date of pre-ap) At Contact Details numbers Ide: National number: B31742 Ide: Mobile number (optional): G20940 Ide: Fax number (optional): B31742 Ide: Mobile number (optional): Canning Obeinternek . Com Identify Yes Identify Other (if different agent/applicant's	extension number:	
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14. Certificates				
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I certify/The applicant certifies that on the cowner is a person with a freeho	old interest or lease	hold interest with at least	7 years left to run) of any part of	of the land or building t
which the application relates.		Oreigned Assess		D-1- DD (111400000)
Signed - Applicant:		Or signed - Agent:	DAOLY WELLS	Date DD/MM/YYYY):
		Thussey a	HARLIS WELLS B CO UTD	10/10/2011
		7, 1,		<u> </u>
Certificate under Regula I certify/ The applicant certifies that I 21 days before the date of this applica eft to run) of any part of the land or bu	ition 6 of the Plan have/the applicant tion, was the owne	has given the requisite rer fr (owner is a person with a	nd Conservation Areas) Regulation tice to everyone else (as listed	below) who, on the day
Name of Owner		Address	1	Date Notice Served
Signed - Applicant:		Or signed - Agent:	/	Date DD/MM/YYYY):
			·	
 Neither Certificate A or B can All reasonable steps have bee interest or leasehold interest w been unable to do so. 	n taken to find out	the names and addresses	s of the other owners (owner is a uilding, or of a part of it , but I ha	person with a freehold ve/ the applicant has
The steps taken were:				
	/	/		
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Name of Owner		Address		Date Notice Served
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circulating in the area where the land	i is situateu).		Than 21 days before the date	e or the application):
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Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
] [
			\$Date:: 201	D-09-10 #\$ \$Revision: 2999 \$

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? Yes No		
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 V 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?		
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 Vo		
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission) Please provide a brief description of the building or part of the	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 proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):		
building you are proposing to demolish:	COWL ADDED TO ENLARCIED		
	CHIMNEY TO PROVENT		
	SUBSTANTIAL INGRESS OF		
	WATER INTO NEW PART OF		
Why is it necessary to demolish or extend (as applicable) all or part	CHIMNEY		
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	Has a Certificate of Immunity from Listing been sought in respect of this building?		
one box must be ticked)	Yes 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			

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls			>	
Roof covering			V	
Chimney		COWL ADDED TO APPROVED ENLARCHED CHIMNEY		
Windows			V	
External doors			V	
Ceilings				
Internal walls			Ø	
Floors			V	
Internal doors				
Rainwater goods			Ø	
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting			Y	
Others (add description)			P	
	itional information on submitted dr u(s)/drawing(s) references:	rawings or plans? Yes No		<u> </u>
	OSC, 068, 078,	12E		

3. Description of Proposed Work (continued)	$\overline{}$	4. Site Address Details
- ,,		Please provide the full postal address of the application site.*
Has the work already started without consent?	☐ No	Unit: House number: House suffix:
If Yes, please state when the work was started (DD/MM/YYYY):		Address 1: 60 CHALTON STREET
16/09/2011		Address 2: Address 3:
(date must be pre-application submission)		Town: LONDON
Has the work been completed without consent?	∏ No	County: Postcode (optional): NWI IHS
If Yes, please state the date when the work was completed (DD/MM/YYYY):		Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing:
16/09/2011		Description.
(date must be pre-application submission)		
5. Related Proposals Are there any current applications, previous proposals or demolitions for the site? If Yes please describe and include the planning applications.	☐ No	6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No If Yes, please complete the following information about the advice
	ference umber	you were given. (This will help the authority to deal with this application more efficiently).
NON MATERIAL 20	27/P	Please tick if the full contact details are not known, and then complete as much as possible: Officer name:
ORIGINAL PLANNING 20 PERMISSION 22	ATIP	ANGIELA RYAN - CASE OFFICIER Reference:
100,000101		DISCUSSIONS, EMAIL
I CAMINITAL MAJES SMI-ON OF	011/ 45/4	Date (DD/MM/YYYY): (must be pre-application submission) 12/09/2011
		Details of pre-application advice received?
		CONFIRMATION OF MINOR AMENDMENT APPLICATION
		AMENDMENT ATTLICATION
7. Neighbour and Community Consultation	7	8. Authority Employee / Member
Have you consulted your neighbours or the local community about the proposal?	✓ No	With respect to the Authority, I am: (a) a member of staff Do any of these statements apply to you?
the local community about the proposal? Yes No If Yes, please provide details:		(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

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