Please See 2011/4932/P For all further Documentation for this Development



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: 020 7974 5713

For office use

Date

Payee App. No. 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

Fax

'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.

1. Applicant Name and Address		2. Agent Name and Address		
Title:	First name:	Title:	MISS First name: NATALIE	
Last name:		Last name: 1	THOMPSON	
Company (optional):	STANLEY SIDINGS LTD	Company (optional):	GERALD EVE LLP	
Unit:	House House suffix:	Unit:	House number: House suffix:	
House name:	C/O AGENT	House name:		
Address 1:		Address 1:	WELBECK STREET	
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:		Town:		
County:		County:		
Country:		Country:		
Postcode:		Postcode: \[\frac{1}{3}\]	W1G 0AY	

3. Description of Proposed Work

Please describe the proposals to alter, extend or demolish the listed building(s):

LISTED BUILDING CONSENT IS REQUIRED FOR THE DEMOLITION OF 1C HAWLEY ROAD TOGETHER WITH INTERNAL AND EXTERNAL ALTERATIONS TO 1 HAWLEY ROAD INCLUDING RAMPED ACCESS INTO THE LOWER GROUND FLOOR.

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 1 House suffix:		
stated without consent.	House name:		
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1: HAWLEY ROAD		
	Address 2:		
	Address 3:		
(date must be pre-application submission)	Town:		
Has the work been	County: CAMDEN		
completed without consent? Yes V No	Postcode (optional): NW1		
If You who are state the edition when the	Description of location or a grid reference. (must be completed if postcode is not known):		
If Yes, please state the date when the work was completed (DD/MM/YYYY):	Easting: Northing:		
	Description:		
(date must be pre-application submission)			
(date must be pre-application submission)			
5. Related Proposals	6. Pre-application Advice		
Are there any current applications, previous proposals or demolitions for the site? ✓ Yes No	Has assistance or prior advice been sought from the local authority about this application?		
If Yes please describe and include the planning application reference number(s), if known:	If Yes, please complete the following information about the advice		
Description Reference number	you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not		
PLEASE REFER TO PLANNING APPLICATION FOR COMPREHENSIVE REDEVELOPMENT	known, and then complete as much as possible:		
OF THE HAWLEY WHARF MASTERPLAN	Officer name:		
	JOANNA ECCLESTONE		
	Reference:		
	NA		
	Date (DD/MM/YYYY): (must be pre-application submission)		
	Details of pre-application advice received?		
	ADVICE RECEIVED DURING 2009 - 2011		
	- 22		
	194		
7. Neighbour and Community Consultation	8. Authority Employee / Member		
Have you consulted your neighbours or	With respect to the Authority, I am: Do any of these		
:he local community about the proposal? Yes No	(a) a member of staff statements apply to you?		
	(b) an elected member (c) related to a member of staff		
If Yes, please provide details:	(d) related to an elected member		
HAWLEY WHARF WORKING GROUP, PUBLIC CONSULTATIONS	If Yes, please provide details of the name, relationship and role		

9. Materials

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls				
Roof covering	REFER TO DESIGN AND ACCESS ST HERITAGE ASSESSMENT	ATEMENT AND		ANTIGH SE
Chimney				
Windows		3		
External doors				
Ceilings				
Internal walls				
Floors				
Internal doors				
Rainwater goods				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting				
Others (add description)				1162
	tional information on submitted drawings or plar (s)/drawing(s) references:	ns? Yes No		#: ^{\$1}

PLEASE REFER TO COVERING LETTER

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? a) Total demolition of the listed building: Yes No	If Yes, do the proposed works include: (you must answer each of the questions)
b) Demolition of a building within	a) Works to the interior of the building? Yes No
the curtilage of the listed 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
i) What is the total volume of the listed building?(cubic metres) PLEASE REFER TO SUPPORTING	to the property (or buildings within its curtilage) internally or externally? Yes No
ii) What is the volume of the part to be demolished?(cubic metres) SUPPORTING STATEMENTS	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) Please provide a brief description of the building or part of the building you are proposing to demolish:	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):
PLEASE REFER TO SUPPORTING STATEMENTS	REFER TO THE DRAWINGS, THE DESIGN AND ACCESS STATEMENT AND HERITAGE ASSESSMENT FOR 1 HAWLEY ROAD
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)? PLEASE REFER TO SUPPORTING STATEMENTS	
42 Listed Building Cooding	(13 Januarita Francisco Lichter
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? Yes No Don't know
Grade I Ecclesiastical Grade I	Yes No Don't know If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II 🗸 Ecclesiastical Grade II 🗌	
Don't know	

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant 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 or building to which the application relates. Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) 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 or building to which this application relates. Name of Owner Date Notice Served Address SEE ATTACHED NOTICE SHEET Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): GERALD EVE LLP 30 09 2011 **CERTIFICATE OF OWNERSHIP - CERTIFICATE C** Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 certify/ 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. The steps taken were: Name of Owner **Address** Date Notice Served Notice 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): Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY):

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 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): Signed - Applicant: Or signed - Agent: Date DD/MM/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 other plans and drawings or The original and 3 copies of a completed and dated information necessary to describe the subject of the application: application form: **√** 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 plan which identifies the land to which the application relates and drawn to an The original and 3 copies of a design and access statement, identified scale and showing the direction of North: $\overline{}$ 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. Or signed - Agent: Date (DD/MM/YYYY): Signed - Applicant: 30 09 2011 (date cannot be GERALD EVE LLP pre-application) 17. Applicant Contact Details 18. Agent Contact Details Telephone numbers Telephone numbers Extension Extension Country code: number: Country code: National number: National number: number: 020 73336371 Country code: Mobile number (optional): Country code: Mobile number (optional): Country code: Country code: Fax number (optional): Fax number (optional): Email address (optional): Email address (optional): NTHOMPSON@GERALDEVE.COM 19. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? f the planning authority needs to make an appointment to carry Other (if different from the |**√**| Agent **Applicant** out a site visit, whom should they contact? (Please select only one) agent/applicant's details) f Other has been selected, please provide: Contact name: Telephone number: Email address: NTHOMPSON@GERALDEVE.COM