

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ

Email (enquiries only)	:	env.devcon@camden.gov.uk	For o
Telephone	:	020 7974 1911	Date
Fax	:	020 7974 5713	Paye
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For office use Date Payee App. No.

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## Application for Planning Permission. 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

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:	MR. First name: DAMCN				
Last name:			Last name:	PEDDAR.				
Company (optional):	16 MILL LANE LED.		Company (optional):					
Unit:	House House suffix:		Unit:	House number: 2_2 House suffix:				
House name:	c/o Aaent,		House [ name: [					
Address 1:			Address 1:	REDFERN ROAD.				
Address 2:			Address 2:					
Address 3:			Address 3:					
Town:			Town:	London				
County:			County:					
Country:	· · · · · · · · · · · · · · · · · · ·		Country:					
Postcode:			Postcode:	NW10 9LB				
3. Descriptio	on of the Proposal							
Please describe	the proposed development, including any	y change of u	se:					
	PROPOSED NEW TERRACE TO E	Roof	''S	REAR Roof				
	TERRACE TO E	EXTG	BAL	cons.				
Has the building	, work or change of use already started?	Γ.	Yes [					
	ite the date when building, re started (DD/MM/YYYY);			(date must be pre-application submission)				
	, work or change of use been completed?	Γ	Yes [	No				
	ite the date when the building, work e was completed: (DD/MM/YYYY):			(date must be pre-application submission)				

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: 1542 Filme House NG House suffix:	authority about this application?
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: MILL LANE,	application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: Lawbon.	
County:	Reference:
Postcode (optional): いいつ・ん・	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway? Yes Yes	Do the plans incorporate areas to store and aid the collection of waste? Yes No
ls a new or altered pedestrian	If Yes, please provide details:
access proposed to or from	in res, piease provide details:
the public highway?	
Are there any new public roads to be provided within the site?	
Are there any new public	
rights of way to be provided	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made for the separate storage and
creation of rights of way?	collection of recyclable waste? Yes
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Thes No
(b) an elected member (c) related to a member of staff	
(c) related to a member of stam (d) related to an elected member	r
If Yes, please provide details of the name, relationship and role	

. Materials applicable, please state what materials are to be used externally. Include type, colour and name for each material:								
	Existing (where applicable)	Proposed	Not applicable	Don't Know				
Walls								
Roof	SLATE.	ETERNIT SLATES						
Windows			Þ					
Doors								
Boundary treatments (e.g. fences, walls)			B					
Vehicle access and hard-standing			Ģ	-				
Lighting								
Others (please specify)			Þ					
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?								
f Yes, please state references for the plan(s)/drawing(s)/design and access statement:								

## 10. Vehicle Parking

Please provide information on the existing and proposed number of on-site parking spaces: Difference in spaces Total proposed (including spaces retained) Total Type of Vehicle Existing Õ C C Cars Light goods vehicles/ public carrier vehicles Motorcycles **Disability spaces** Cycle spaces Other (e.g. Bus) Other (e.g. Bus)

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes Ano
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?
If Yes, please include the details of the existing system on the	Will the proposal increase the flood risk elsewhere?
application drawings and state references for the plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Dond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
15. Biodiversity and Geological Conservation	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable	
likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	RESIDENTIAL.
they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved	Is the site currently vacant? Yes Ao
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species: Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
No	When did this use end (if known)?
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate)
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development	Land which is known to be contaminated? Yes
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable
No	to the presence of contamination?
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes	Does the proposal involve the need to dispose of trade effluents or waste? Yes
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the development or might be important as part	of trade effluents or waste
of the local landscape character? Yes No If Yes to either or both of the above, you <u>may</u> need to provide a full	<b>}</b>
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be	
submitted alongside your application. Your local planning authority should make clear on its website what the survey should	
contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'.	

17. Residential U	nits (In	cluc	ling	Con	versi	ion)									
Does your proposal include the gain, loss or change of use of reside If Yes, please complete details of the changes in the tables below:						resider ow:	itial units? Yes		10						
Proposed Housing						Existing Housing									
Market Housing	Not known	1	Numt	per of		ooms Unknown	Total	Market Housing	Not known	1	Numl	per of		ooms Unknown	Total
Houses			-		-11			Houses		•				CIRCIO	
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	T	otals	(a + b	+ <b>c</b> +	d+e	+f+g) =			Т	otals	(a + b	)+c+	d+e	+f+g) =	
		_													
Social Rented	Not known		Numt 2	per of 3		oo <u>ms</u> Unknown	Total	Social Rented	Not known	1	Numl 2	oer of 3	· · · · · · · · · · · · · · · · · · ·	ooms Unknown	Total
Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats			l				
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	Ť	otals	(a + b	+ + + +	d+e	+f+g) =			T(	otals	; (a + b	)+c+	d+e	+f+g) =	
	I					<u>.                                    </u>	<b>T</b> 1			[					Tatal
Intermediate	Not known		Numł 2	cer of	Bedro 4+	ooms Unknown	Total	Intermediate	Not known	1	Numl 2	ber of 3		ooms Unknown	Total
Houses								Houses							
Flats and maisonettes						 		Flats and maisonettes							
Live-work units								Live-work units			ļ				
Cluster flats		<u> </u>				ļ		Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type						L		Unknown type							
	T	otals	(a + b	+++++++++++++++++++++++++++++++++++++++	d + e	+f+g) =			T(	otals	i (a + b	)+C+	d+e	+f+g) =	
Key worker	Not known		Numl	oer of		ooms Unknown	Total	Key worker	Not known	1	Numl	ber of		ooms Unknown	Total
Houses		<u> </u>	<b></b>			011/01/0441		Houses		-	+				
Flats and maisonettes			<b> </b>			<b></b>		Flats and maisonettes				<b>-</b> -	<b> </b>		
Live-work units								Live-work units			+				
Cluster flats							<b>h</b>	Cluster flats							
Sheltered housing						<u> </u>		Sheltered housing							
Bedsit/studios			1					Bedsit/studios							
Unknown type								Unknown type							
	T	otals	(a + b	)+c+	d+e	+f+g)=			T	otals	s (a + t	)+c+	d+e	+f+g) =	
Total proposed i	residen	tial u	nits	(A +	B+C	+ D) =		Total existing	resider	ntial	units	(E +	- F + G	5 + H) =	
TOTAL NET GAIN or	TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total)														

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	18. All Types of Development: Non-residential Floorspace								
· · · · ·			. <u> </u>	in or change of u		······································		No	
If you	If you have answered Yes to the question above please add details in the following table:            ·····························								
Us	Use class/type of use		Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by use or den (square m	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal fioorspace following development (square metres)	
A1	Sh	ops							
		able area:							
A2	Financ professior	ial and al services					-		
A3	Restaurant	s and cafes							
A4	Drinking est	ablishments							
A5	Hot food	takeaways							
B1 (a)		er than A2)							
B1 (b)		ch and pment						1	
B1 (c)		dustrial				15			
B2	General	industrial			1	t			
B8	Storage or	distribution							
C1		nd halls of lence							
C2		institutions					· · · · · · · · · · · · · · · · · · ·		
D1		idential utions					-		
D2	1	and leisure							
OTHER	THER								
Please Specify							-		
speciny	Тс	otal					· · · · · · · · · · · · · · · · · · ·		
In add	L dition, for ho	tels, resident	ial ins	titutions and ho	stels, please add	ditionally inc	licate the loss or gain of	rooms	
Use class	Type of use		_	ing rooms to be l of use or dem	lost by change   Total room		ns proposed (including nanges of use)	Net additional rooms	
C1	Hotels Residential								
	Institutions					<del> </del>			
OTHER				· · · · · · · · · · · · · · · · · · ·		<u></u>			
Please Specify									
19. Em	ployment								
Please co	omplete the	following inf	ormat	tion regarding er	nployees:				
				Full-time	Part-	time		al full-time quivalent	
Exi	isting employ	yees			N/V				
Pro	posed emplo	oyees			1 1/				
	urs of Ope	•	tur a fa						
rieds	Use			or each non-resid / to Friday	Saturda		Sunday and	Not known	
						<u> </u>	Bank Holidays		
	*111			M	117.				
					L				
21. Site	e Area								
	ate the site a	rea i <del>n he car</del>	<u>oc /b-</u>	288 M	~2_				
· .ease st	are the site d				- <u> </u>				

22. Industrial or Commercial Processes and Machinery								
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:								
Is the proposal a waste management development?								
If the answer is Yes, please complete the following table:								
	Not applicable	The total capacity of t including engineering s allowance for cover or tonnes if solid waste	urcharge and making	or (or litror if liquid waste)				
Inert landfill								
Non-hazardous landfill								
Hazardous landfill								
Energy from waste incineration								
Other incineration								
Landfill gas generation plant								
Pyrolysis/gasification		N						
Metal recycling site								
Transfer stations		. 1	1					
Material recovery/recycling facilities (MRFs)								
Household civic amenity sites								
Open windrow composting								
In-vessel composting								
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment				*·				
Recycling facilities construction, demolition and excavation waste								
Storage of waste								
Other waste management		<b></b>						
Other developments								
Please provide the maximum annual operat	ional 1	hroughput of the follow	ing waste streams:					
Municipal								
Construction, demolition and e Commercial and industr								
Hazardous	Idi							
If this is a landfill application you will need to planning authority should make clear what	o prov inforn	ride further information		n can be determined. Your waste				
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities stat			No 📝 Not ap	plicable				
If Yes, please provide the amount of each su	bstan	ce that is involved:						
Acrylonitrile (tonnes)	E	thylene oxide (tonnes)		Phosgene (tonnes)				
Ammonia (tonnes)	Hydr	ogen cyanide (tonnes)	~	Sulphur dioxide (tonnes)				
Bromine (tonnes)	1	iquid oxygen (tonnes)		Flour (tonnes)				
Chlorine (tonnes)	quid p	etroleum gas (tonnes)	Re	efined white sugar (tonnes)				
Other:		Ot	her:					
Amount (tonnes):		An	nount (tonnes):					

One Certificate A, B, C, or D, must b	e completed, tog	ether with the Agricultu	al Holdings Certificate with t	his application form	
	CERTIFICAT	E OF OWNERSHIP - CERTI	FICATE A		
Town and Country Planning (D I certify/The applicant certifies that on t	evelopment Man	agement Procedure) (Eng	gland) Order 2010 Certificate	under Article 12	
owner (owner is a person with a freehold	interest or leasehol	d interest with at least 7 yea	rs left to run) of any part of the l	and or building to	
which the application relates.		Ordened Acces		D-++ (DD/1444/00000	
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):	
	31-3-11				
		E OF OWNERSHIP - CERTI			
Town and Country Planning (De certify/ The applicant certifies that I ha	evelopment Mana	agement Procedure) (Eng	land) Order 2010 Certificate	under Article 12	
21 days before the date of this applicati	on, was the owner	(owner is a person with a fi	reehold interest or leasehold inte	rest with at least 7 years	
<i>left to run</i> ) of any part of the land or buil	ding to which this	application relates.	<u></u>		
Name of Owner		Address		Date Notice Served	
Signed Applicants		Orsigned Agents			
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):	
1					
Town and Country Planning (De	CERTIFICATI	E OF OWNERSHIP - CERTI	FICATE C land) Order 2010 Certificate	under Article 12	
Town and Country Planning (De I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so. The steps taken were:	evelopment Mana e issued for this ap taken to find out i	agement Procedure) (Eng plication the names and addresses o	<b>Jand) Order 2010 Certificate</b> of the other owners ( <i>owner is a p</i>	person with a freehold	
<ul> <li>I certify/ The applicant certifies that:</li> <li>Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so.</li> </ul>	evelopment Mana e issued for this ap taken to find out i	agement Procedure) (Eng plication the names and addresses o	<b>Jand) Order 2010 Certificate</b> of the other owners ( <i>owner is a p</i>	person with a freehold	
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I certify/ The applicant certifies that: <ul> <li>Neither Certificate A or B can be</li> <li>All reasonable steps have been interest or leasehold interest with been unable to do so.</li> </ul> The steps taken were:   Name of Owner	e issued for this ap taken to find out to at least 7 years lef	agement Procedure) (Eng plication the names and addresses o t to run )of the land or build Address	Iand) Order 2010 Certificate of the other owners (owner is a p ling, or of a part of it , but I have	person with a freehold e/ the applicant has Date Notice Served	
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I certify/ The applicant certifies that:  Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so. The steps taken were: Name of Owner Name of Owner Notice of the application has been pub	e issued for this ap taken to find out to at least 7 years lef	agement Procedure) (Eng plication the names and addresses o t to run )of the land or build Address	Iand) Order 2010 Certificate of the other owners (owner is a p ling, or of a part of it , but I have on the following date (which	Date Notice Served	

<ul> <li>24. Ownership Certificates (continue of the steps taken were:</li> <li>24. Ownership Certificates (continue of the steps taken were:</li> <li>24. Ownership Certificates (continue of the steps taken were:</li> </ul>	<b>CERTIFICATE</b> velopment Mana r this application aken to find out t owner (owner is a	he names and addresses person with a freehold int	of everyone else who, on the da	y 21 days before the least 7 vears left to run )
Notice of the application has been publis (circulating in the area where the land is	hed in the follow situated):	newspaper	On the following date (which than 21 days before the date	n must not be earlier of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
25. Agricultural Land Declaration Town and Country Planning (Deve Agricult (A) None of the land to which the applica	AGRICUL Hopment Managural Land Declara	ation - You Must Complet	<b>land) Order 2010 Certificate u</b> e Either A or B	nder Article 12
Signed - Applicant:		Or signed <u>- Agent:</u>	nolaing.	Date (DD/MM/YYYY)
		That		31-3-11
(B) I have/ The applicant has given the re before the date of this application, was a as listed below: Name of Tenant	quisite notice to tenant of an agri	every person other than i cultural holding on all or Address	nyself/ the applicant who, on th part of the land to which this ap	e day 21 days plication relates, Date Notice Served
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY)
<b>26. Planning Application Requir</b> Please read the following checklist to mal information required will result in your ap the Local Planning Authority has been sul The original and 3 copies of a completed application form:	ke sure you have a plication being de britted.	sent all the information ir	t be considered valid until all info	rre to submit all prmation required by
The original and 3 copies of the plan which the land to which the application relates of identified scale and showing the direction The original and 3 copies of other plane a	drawn to an of North:	if required The origin	al and 3 copies of a design and a I (see help text and guidance not al and 3 copies of the completed o Certificate (A, B, C, or D - as ap	tes for details):

The original and 3 copies of other plans and drawings or	
information necessary to describe the subject of the application	

The original and 3 copies of the completed, dated Article 12 Certificate (Agricultural Holdings):

## 27. 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 cannot be
	Mari	6		- 3-11.	pre-application)
28. Applicant Contact Details		29. Agent Co	ontact Details	<u> </u>	
Telephone numbers		Telephone num	bers		
Country code: National number:	Extension number:	Country code:	National number	<u> </u>	Extension number:
Country code: Mobile number (optional):	J []	Country code:	Mobile number (	optional):	
			079700	147449	. ]
Country code: Fax number (optional):		Country code:	Fax number (opti	· •	- <u>-</u>
Email address (optional):		Email address (o	optional):		
30. Site Visit					
Can the site be seen from a public road, public fo	otpath, bridleway o	other public land	? Yes	No	
If the planning authority needs to make an appoi out a site visit, whom should they contact? (Please	ntment to carry e select only one)	Agent	Applicant		different from the plicant's details)
If Other has been selected, please provide:					
Contact name:		Telephone num	oer:	. <u></u>	
Email address:					