

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ

Telephone Fax

Email (enquiries only): env.devcon@camden.gov.uk : 020 7974 1911 : 020 7974 5713

For office use Date Payee App. No.

Fee

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

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

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:	Ms First name: Muchen	Title: MR First name: James	
Last name:	Bonlan	Last name: Doncon	
Company (optional):	School of Phinemach, University of London	(optional): Mraws Berra Arcuircens Lio,	
Unit:	House House suffix:	Unit: House House suffix:	
House name:		House name:	
Address 1:	29-59 BRUNSWICK Se	Address 1: 1 COMPTON RD.	
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	Lenson	Town: Loubor .	
County:		County:	
Country:	uk	Country:	
Postcode:	WOLN JAX	Postcode: Sw19 7QA.	

3. Site Address Details	4. Pre-application Advice		
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?		
Unit: House House Suffix:			
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: School of Privenich	application more efficiently). Please tick if the full contact details are not		
Address 2: UNIVERSITH OF LONDON	known, and then complete as much as possible:		
Address 3: 29-39 BRUNKWIKK SQ.	Officer name:		
Town: Lowbow.	Reference:		
County:	CA 2009 ENA 02078		
optional): WCIN IAX	Date (DD/MM/YYYY): (must be pre-application submission)		
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?		
Easting: Northing:	PROCEED TO PUNNING - MTERIALS TO		
Description:	RENTE TO FOUNDING MUSCUM ENTENSION :		
AP. SITE IS LAND TO EAST OF	ore wonde newber, gren merre.		
School of Proking (ASJ. To Fornier Mus.			
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: Denourrow of Eristing Pontatein + Enderson of 2 Ericum storing & smedd A7			
GROUND FROM LEVEL - ASSOCIATED PARKIN	g BANS.		
Reference number: $2009/3734/P$ Date of decision:	(Date must be pre-application submission) (DD/MM/YYYY)		
Please state the condition number(s) to which this application relate	35.		
1.	6.		
2. SAMPLE · PANEL	7.		
3.	8.		
4.	9.		
5.	10.		
Has the development already started?	Yes No		
If Yes, please state when the development started (DD/MM/YYYY):			
Has the development been completed?	Yes No		
If Yes, please state when the development was completed (DD/MM,	(VYYY): 14/04/10 (date must be pre-application submission)		
6. Discharge Of Condition Please provide a full description and/or list of the materials/details the second seco	hat are being submitted for approval:		
SAMPLE PANEL PROVIDED ON SITE + PLANNIN ATTICHED E-MAIL	4 OFFICE INMTED TO APPMOVE - SEE		
7. Part Discharge Of Condition(s)			
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:			
	\$ Date:: 2010-09-10 #\$ \$ Revision: 2999 \$		

The original and 3 copies of a The completed and dated application form:	original and 3 copies of other plans and drawings nformation necessary to describe the subject of the application:
The correct fee:	
9. Declaration I/we hereby apply for planning permission/consent as described in t information. Signed - Applicant:	his form and the accompanying plans/drawings and additional Or signed - Agent
Date (DD/MM/YYYY): O6 / 12 / 2010 (date cannot be pre-application)	
10. Applicant Contact Details Telephone numbers Country code: National number: 02.0 7753 5817 Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional):	11. Agent Contact Details Telephone numbers Country code: National number: 020 8946 4141 Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional):
12. Site Visit Can the site be seen from a public road, public footpath, bridleway of If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>) If Other has been selected, please provide: Contact name:	or other public land? Yes No Agent Applicant Gagent/applicant's do Telephone number.

• •