

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ

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Telephone : 020 7974 1911

: 020 7974 5713

For office use

Date Payee

(2. Agent Name and Address

App. No.

Fee

Application for Planning Permission and conservation area consent for demolition in a conservation area.

Town and Country Planning Act 1990

Planning (Listed Building 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.

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.

Title:	First nam	e:			Title:	MRS	First name:	VALERI	E
Last name:					Last name:	SCOTT			
Company (optional):	SARENA LTD				Company (optional):	CgMs 1	LTD		
Unit:	House number:		House suffix:		Unit:		House number:	26	House suffix:
House name:	, , , , , , , , , , , , , , , , , , ,				House name:	MORLEY	/ HOUSE		
Address 1:					Address 1:	HOLBOR	RN VIADUC	T	
Address 2:					Address 2:				
Address 3:					Address 3:		, A PARTIE OF THE PARTIE OF TH		
Town:					Town:	LONDO	Ŋ		
County:					County:				
Country:					Country:	777			
Postcode:				j	Postcode:	EC1A	2AT		J
3. Description of the Proposal Please provide a description of the proposal, including details of the proposed demolition: DEMOLITION OF EXISTING BUILDING WITH RETENTION OF EXISTING SOUTHERN BOUNDARY WALL AND REDEVELOPMENT TO PROVIDE A CLASS B1 BUSINESS UNIT (534M²) AND A TERRACE OF FOUR HOUSES.									
change of u	If Yes, please state the date when building, work or works or use were started (DD/MM/YYYY): (date must be pre-application submission) If Yes, please state the date when building, work or lease of use been completed? Yes No or change of use was completed (DD/MM/YYYY):								
change of u	ise been completed?		No	-	st be pre-appl	•	mission)	L	#\$ \$Revision: 2999 \$

Please provide the full postal address of the application site. Unit: 2
House DUMPTON PLACE AND LAND TO REAR OF If Yes, please complete the following information about the adv
DOMPTON PLACE AND LAND TO REAR OF THE ITES, please complete the following information about the adv
11/22 (11/2 11/2 11/2 11/2 11/2 11/2 11/
Address 1: 68-88 GLOUCESTER AVENUE 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: LONDON JOHN SHEEHY, NEIL CLEERY AND EDWARD JARVI
County: Reference:
Postcode (optional):
Description of location or a grid reference. (must be completed if postcode is not known): [must be pre-application submission] [must be pre-application submission]
Easting: Details of pre-application advice received?
Description: MEETINGS ON 5 MARCH 2010 AND 17 AUGUS
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 X No Do the plans incorporate areas to store and aid the collection of waste? X Yes
Is a new or altered pedestrian access proposed to or from the public highway? X Yes No
Are there any new public roads to be provided within the site? Yes X No
Are there any new public rights of way to be provided within or adjacent to the site? Yes X No
Do the proposals require any diversions
/extinguishments and/or creation of rights of way? Yes X No Have arrangements been made for the separate storage and collection of recyclable waste? X 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
(s)/drawings(s)
DESIGN AND ACCESS STATEMENT.
8. Authority Employee / Member
With respect to the Authority, I am: (a) a member of staff (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

9. Explanation for Proposed Demolition Work Why is it necessary to demolish all or part of the building(s) and/or structure(s)? THE EXISTING BUILDING IS ALREADY PARTLY DEMOLISHED WITH THE REMAINING PART IN POOR CONDITION. COMPLETE DEMOLITION APART FROM SOUTHERN WALL OF EXISTING BUILDING IS REQUIRED TO IMPLEMENT THE PROPOSED MIXED USE DEVELOPMENT. 10. Materials If applicable, please state what materials are to be used externally. Include type, colour and name for each material: Not applicable Don't Existing Proposed (where applicable) Know Walls BRICK BRICK AND RENDER Roof MAINLY GREEN ROOFS CORRUGATED GALVANISED METAL Windows METAL POWDER COATED ALUMINIUM Doors , , METAL AND GLASS TIMBER Boundary treatments BRICK WALLS BRICK WALLS (e.g. fences, walls) Vehicle access and N/A N/A hard-standing Lighting N/A N/A Others N/A N/A(please specify) X Yes □ No Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? If Yes, please state references for the plan(s)/drawing(s)/design and access statement: SITE PLAN AT 1:1250 SCALE AND DRAWING NOS. 3001A, 3002A, 3003A, 3004A, 3005A, 3006A, 3011A, 3012A, 3013A, 3014A, 3015A, 3016A, 3021A AND 3022A. LANDSCAPE DRAWING NOS. 1250.001, 002 AND 03. DESIGN AND ACCESS STATEMENT AND OTHER REPORTS (SEE COVERING LETTER) 11. Vehicle Parking Please provide information on the existing and proposed number of on-site parking spaces: Total proposed (including Difference Total Type of Vehicle spaces retained) Existing in spaces Cars Light goods vehicles/ public carrier vehicles Motorcycles Disability spaces

14

_

Cycle spaces

Other (e.g. Bus) Other (e.g. Bus) NONE

+14

12. Foul Sewage	13. 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
X Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and
Septic tank Other	consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
	Yes X No
Package treatment plant Are you proposing to	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a
If Yes, please include the details of the existing system on the application drawings and state references for the	watercourse (e.g. river, stream or beck)? Will the proposal increase
plan(s)/drawing(s):	the flood risk elsewhere? Yes No
	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
14. Biodiversity and Geological Conservation	15. Existing Use
, -	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	VACANT
likelihood that any important biodiversity or geological	
conservation features may be present or nearby and whether 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 and enhanced within the application site, or on land adjacent to	Is the site currently vacant? X Yes No
or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species:	CLASS B2 FORMER CAR REPAIR AND SERVICE
Yes, on the development site	WORKSHOP.
Yes, on land adjacent to or near the proposed development	
X No	
b) Designated sites, important habitats or other biodiversity features:	When did this use end (if known)? (DD/MM/YYYY): March 2009
Yes, on the development site	Does the proposal involve any of the following?
Yes, on land adjacent to or near the proposed development X No	If yes, you will need to submit an appropriate contamination assessment with your application.
c) Features of geological conservation importance:	Land which is known to be contaminated? Yes No
Yes, on the development site	suspected for all or part of the site? Yes No
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable X Yes No
X No	to the presence of contamination? X Yes No
16. Trees and Hedges	17. Trade Effluent
Are there trees or hedges on the proposed development site? Yes X No	Does the proposal involve the need to dispose of trade effluents or waste? Yes X No
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? If Yes to either or both of the above, you may need to provide a full	
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'.	

Does your proposal inc	8. Residential Units (Including Conversion) Does your proposal include the gain, loss or change of use of residential units? [X] Yes [No No N														
F	ropos	ed I	Hous	ing					Existi	ng F	lous	ing			
Market Housing	Not known	1	Numl 2	per of		ooms Unknown	Total	Market Housing	Not known	1	Numi 2	per of	Bedro	ooms Unknown	Total
Houses			2	2			4	Houses			<u> </u>	3_	4+	OTIKHOWIT	(i
Flats and maisonettes							į,	Flats and maisonettes							b
Live-work units							(Live-work units							
Cluster flats		***************************************					- U	Cluster flats							d
Sheltered housing			***************************************				C.	Sheltered housing							į.
Bedsit/studios							í	Bedsit/studios							į
Unknown type							g	Unknown type					 		9
	T	otals	(a + t	+ + +	d + e	+f+g)=	4		T	otals	(a + b) + <i>c</i> +	d+e	+f+g)=	.0
															
Social Rented	Not known	1	Numl 2	per of	***************************************	ooms Unknown	Total	Social Rented	Not known	1	Num 2	ber of	Bedre 4+	ooms Unknown	Total
Houses							C	Houses							a
Flats and maisonettes							Ì.	Flats and maisonettes							l to
Live-work units							Ç	Live-work units							ć
Cluster flats							d	Cluster flats							ď
Sheltered housing							¢:	Sheltered housing							£
Bedsit/studios							1	Bedsit/studios							/
Unknown type							9	Unknown type							g
	Т	otals	(a + l) + <i>c</i> +	d + e	+f+g)=	Θ		T	otals	(a + l) + c +	d+e	+ f + g) =	0
	T						1	11	1	T	•		[O]		Total
Intermediate	Not known	1	Num 2	ber of		ooms Unknowr	Total	Intermediate	Not known	1_	2	3		ooms Unknowr	1
Houses							a	Houses			ļ	ļ			£1
Flats and maisonettes							t/	Flats and maisonettes				ļ			b
Live-work units			<u></u>				C	Live-work units			ļ				1
Cluster flats			ļ				ij.	Cluster flats				<u> </u>			1
Sheltered housing					ļ		(r	Sheltered housing			ļ	ļ			· ·
Bedsit/studios		ļ					1	Bedsit/studios					ļ		1
Unknown type				<u></u>			9	Unknown type							9
	T	otal	s (a + l	b + c +	-d+e	+f+g)=	0		Т	otals	(a +	b + c +	-d+e	+f+g)=	0
	Т	Τ		,			T-4-1	1	1	Γ	Niver	<u></u>	(D a alu		Tota
Key worker	Not known	1	Num 2	ber o		ooms Unknowr	Total	Key worker	Not known	1	Num 2	per o		ooms Unknowr	
Houses		Ť	亡		<u> </u>		i	Houses							(ř
Flats and maisonettes	; <u> </u>		—				t:	Flats and maisonettes	; D		"				b
Live-work units							{	Live-work units							C
Cluster flats		1					(i	Cluster flats							d
Sheltered housing		1		1			r.	Sheltered housing							e
Bedsit/studios							ŧ	Bedsit/studios							!
Unknown type							Va. 7.5	Unknown type							g
	7	otal	s (a +	b + c +	- d + e	(f+g)=	.0		Т	otals	(a +	b + c +	+ d + e	:+f+g)=	Ø
Total proposed	Total proposed residential units $(A+B+C+D)=4$ Total existing residential units $(E+F+G+H)=0$														
TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total): $+4$															

Second Companies Second Comp	9. All Types of Development: Non-residential Floorspace								
Shops Shop									No
Net tradable area:	•			ficable		Gross internal to be lost by o use or dem	floorspace hange of olition	Total gross internal floorspace proposed (including change of	internal floorspace following development
A2 professional services A3 Resturants and cafes A4 Orinking establishments A5 Not food takeaways A6 Not food takeaways B1 (4) Office (other than A2) B1 (b) Research and B1 (c) Light industrial B1 (c) Light industrial B2 General industrial B2 General industrial B3 Storage or distribution C1 Non-residential institutions B8 Storage or distribution C1 Non-residential institutions D1 Non-residential institutions D2 Assembly and leisure D1 Non-residential institutions and hostels, please additionally indicate the loss or gain of rooms D1 Non-residential institutions D2 Assembly and leisure D3 Assembly and leisure C1 Note of the desired applicable of use or demolition D1 Institutions D2 Assembly in Total D3 Assembly in Total D3 Assembly in Total D4 Assembly in Total D5 Assembly in Total D6 Assembly in Total D7 Assembly in Total D7 Bease or Total food in Total food	A1	Sho	ps						
professional services		Net tradal	ble area:						
A4 Drinking establishments	A2								
AS Hot food takeaways	А3	Restaurants	and cafes						
Bi (a) Office (other than A2)	A4	Drinking esta	ıblishments						
Bit (b) Research and development Bit (c) Ught industrial 368	A5	Hot food to	akeaways						
Bit Co Uight Industrial	B1 (a)								
B2 General industrial	B1 (b)					470			
Storage or distribution	B1 (c)								
C1 Hotels and halls of residence	B2	General ir	ndustrial		368				
C2 Residential institutions	B8								
C2 Residential institutions D3 Non-residential institutions D4 Assembly and leisure D5 THER D6 Specify D7 Total D8 Specify D9 of use Not class or gain of rooms D8 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class or gain of rooms D9 Specify D9 of use Not class of use D9 Specify D9 Spe	C1								
D2 Assembly and leisure	C2 ²	Residential i	nstitutions						
D2 Assembly and leisure	D1								
Please specify Total 368 470 In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Class Type of use applicable of use or demolition of use or demolition of use or demolition changes of use) Net additional rooms Net additional rooms Net additional rooms Net additional rooms Please Gesidential institutions OF HER Gesidential institutions Full-time Part-time Total full-time equivalent equivalent existing employees Proposed employees Sexpected 20 TO 30 Total full-time equivalent Sexpected 20 TO 30	D2								
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use Type of use applicable of use or demolition C1 Hotels C2 Residential institutions C3 Residential institutions C4 Residential institutions C5 Residential institutions C6 Residential institutions C7 Residential C7	OTHER						***************************************		
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use class Type of use applicable C1 Hotels	Please				1				
Type of use applicable Existing rooms to be lost by change of use or demolition Total rooms proposed (including changes of use) Net additional rooms	эрсспу				368	470			
Type of use applicable Existing rooms to be lost by change of use or demolition Total rooms proposed (including changes of use) Net additional rooms	In ac	ldition, for ho	tels, residen	itial in	stitutions and ho	ostels, please ad	ditionally in	dicate the loss or gain of	rooms
Residential Institutions	Use	T of	Not		ing rooms to be	lost by change	Total room	ns proposed (including	
Institutions	C1	Hotels							
Please specify	C2				A constitution of the state of				
Decify O. Employment Please complete the following information regarding employees: Full-time Part-time equivalent Existing employees 3 Proposed employees EXPECTED 20 TO 30 C1. Hours of Opening Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays CLASS B1 OLIGINARY OF CLASS B1	OTHER	HISCICULIONS							
Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees 3 Proposed employees EXPECTED 20 TO 30 Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sank Holidays Not known CLASS B1 Volume Saturday Sank Holidays Not known CLASS B1 Volume Saturday Saturday Sank Holidays Not known	Please						<u> </u>		
Please complete the following information regarding employees: Full-time	specify								
Full-time Part-time Total full-time equivalent Existing employees 3 Proposed employees EXPECTED 20 TO 30 11. Hours of Opening Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known CLASS B1 On the company of the company		• •							
Existing employees 3 Proposed employees EXPECTED 20 TO 30 11. Hours of Opening Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Saturday Bank Holidays Not known CLASS B1 Not known 22. Site Area	Please c	omplete the f	ollowing in	forma				Tot	tal full-time
Proposed employees EXPECTED 20 TO 30 11. Hours of Opening Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known CLASS B1 12. Site Area				··-··	Full-time	Part	-time		guivalent
Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known CLASS B1 22. Site Area									
Please state the hours of opening for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known CLASS B1	Proposed employees EXPECTED 20 TO 30								
Use Monday to Friday Saturday Sunday and Bank Holidays Not known CLASS B1 Site Area		-	_		_				
CLASS B1 22. Site Area							Sunday and	Not known	
22. Site Area	~-	, and the second			y to Friday	Saturda	у	Bank Hólidays	
	CLASS B1								
Please state the site area in hectares (ha) 0.074			-	-		· · · · · · · · · · · · · · · · · · ·			
\$ Date: 2010-09-10 #\$ \$ Revision: 2999 \$	Please s	tate the site a	rea in hecta	res (h	a) 0.074				

23. Industrial or Commercial Proce	sses	and Machine	ry				
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? Yes X No							
If the answer is Yes, please complete the follo		· · · · · · · · · · · · · · · · · · ·					
	Not applicable	The total capa including engin allowance for tonnes if solic	city of the void in e eering surcharge a cover or restoration waste or litres if l	and making no n material (or	Maximum annual operational through put in tonnes (or litres if liquid waste)		
Inert landfill	 	1					
Non-hazardous landfill							
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant	一						
Pyrolysis/gasification							
Metal recycling site							
Transfer stations				A.V.A. Authlesia			
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites	H						
Open windrow composting	붐						
In-vessel composting	품						
Anaerobic digestion							
Anneroble digestion Any combined mechanical, biological and/ or thermal treatment (MBT)							
I I							
Sewage treatment works							
Other treatment							
Recycling facilities construction, demolition and excavation waste							
Storage of waste		<u> </u>					
Other waste management							
Other developments							
Please provide the maximum annual operat	ional	throughput of th	e following waste	streams:			
Municipal							
Construction, demolition and e		ation					
Commercial and indust Hazardous	riai			······································			
If this is a landfill application you will need to planning authority should make clear what	o pro infor	ovide further infor mation it requires	nation before you on its website.	ur application o	can be determined. Your waste		
24. Hazardous Substances							
Does the proposal involve the use or storag the following materials in the quantities state			X No	Not appli	cable		
If Yes, please provide the amount of each substance that is involved:							
Acrylonitrile (tonnes)	I	Ethylene oxide (to	onnes)]	Phosgene (tonnes)		
Ammonia (tonnes)	Hyd	rogen cyanide (to	onnes)]	Sulphur dioxide (tonnes)		
Bromine (tonnes) Liquid oxygen (to			onnes)		Flour (tonnes)		
Chlorine (tonnes) Liquid petroleum gas (tonnes) Refined white sugar (tonnes)							
Other:			Other:				
Amount (tonnes):			Amount (to	nnes):			

25. Ownership Certificates	district an invalidation of the first transfer of the first transf	atifican december of the company of the company
	pleted, together with the Agricultural Holdings Cer CERTIFICATE OF OWNERSHIP - CERTIFICATE A	tificate with this application form
Town and Country Planning (Develop	ment Management Procedure) (England) Order 2010	Certificate under Article 12 &
Regulation 6 of the Plant Control of the Plant Control of the Applicant Control of the Applicant Control of the Applicant Control of the Plant Control of the Applicant Control of the Plant Control o	anning (Listed Buildings and Conservation Areas) Re lay 21 days before the date of this application nobody	gulations 1990 except myself/ the applicant was the
	est or leasehold interest with at least 7 years left to run) o	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY);
эдней - друкана		
	Valu J. M CgMs I	O5/11/10
Town and Country Planning (Develop Regulation 6 of the Pla I certify/ The applicant certifies that I have/th	CERTIFICATE OF OWNERSHIP - VERTIFICATE B ment Management Procedure) (England) Order 2010 anning (Listed Buildings and Conservation Areas) Reg be applicant has given the requisite notice to everyone e as the owner (owner is a person with a freehold interest or o which this application relates.	gulations 1990 lise (as listed below) who, on the day
Name of Owner	Address	Date Notice Served
	Annual Control of the	
		·
,		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
	CERTIFICATE OF OWNERSHIP CERTIFICATE C	
Regulation 6 of the Pl. I certify/ The applicant certifies that: Neither Certificate A or B can be issue All reasonable steps have been taker	ement Management Procedure) (England) Order 2010 anning (Listed Buildings and Conservation Areas) Re- ed for this application In to find out the names and addresses of the other owne ast 7 years left to run) of the land or building, or of a part of	gulations 1990 rs (owner is a person with a freehold
Name of Owner	Address	Date Notice Served
Alaka di kacamatan		
Notice of the application has been published (circulating in the area where the land is situation)	on the following newspaper On the following than 21 days be	g date (which must not be earlier efore the date of the application):
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
and the state of t	Stagned rigeria	

25. Ownership Certificates (continue								
Town and Country Planning (Developm	nent Managemen	NNERSHIP - CERTI t Procedure) (Eng	land) Order 2010 Certificate u	ınder Article 12 &				
Regulation 6 of the Plan I certify/ The applicant certifies that:	nning (Listed Buil	dings and Conser	vation Areas) Regulations 199	90				
 Certificate A cannot be issued for this a 	application		Comment of the state of the state of	21 d b(d				
 All reasonable steps have been taken t date of this application, was the owner 	' (owner is a person	with a freehold inte	rest or leasehold interest with at	least 7 years left to I	ne run)			
of any part of the land to which this ap The steps taken were:	plication relates, b	ut I have/ the appl	icant has been unable to do so.	·				
The steps taken were.								
Notice of the application has been published in	n the following ne	wsnaper	On the following date (which	n must not be earli	 er			
(circulating in the area where the land is situate	ed):	paper	than 21 days before the date	of the application):			
Signed - Applicant:	Or sign	ned - Agent:		Date (DD/MM/Y)	 /YY):			
26 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1								
26. Agricultural Land Declaration	AGRICIII TIIRAI	LAND DECLARAT	TON					
Town and Country Planning (Developin	nent Managemer	t Procedure) (Eng	land) Order 2010 Certificate (under Article 12				
~		You Must Complet						
(A) None of the land to which the application i		·-	holding.	D : (DD (1444.8)	3000			
Signed' - Applicant:	Or sig	ned - Agent:	10	Date (DD/MM/Y				
		Valen	CgMs LTD	05/11/10)			
(B) I have/ The applicant has given the requisit before the date of this application, was a tenar	e notice to every p	person other than a	wself/ the applicant who, on the	e day 21 days				
as listed below:		,		Date Notice Ser				
Name of Tenant		Address		Date Notice Ser	veu			
		-						
			, en					
		3,4444						

	*****		<u></u>		***			
Signed - Applicant:	Or sig	ned - Agent;		Date (DD/MM/Y	YYY);			
27. Planning Application Requireme								
Please read the following checklist to make sur information required will result in your applica	e you have sent al	the information in	support of your proposal. Fail	ure to submit all formation required	l hv			
the Local Planning Authority has been submitt	ed.	a nivana. It will no	De considered valid and an	osmunon required				
The original and 3 copies of a completed and dapplication form:	lated	The correct	t fee:		X			
The original and 3 copies of the plan which ide	entifies	The origin	al and 3 copies of a design and		[কুন			
the land to which the application relates drawn	n to an	r=====================================	(see help text and guidance no		X			
identified scale and showing the direction of N		The origin Ownership	al and 3 copies of the complete c Certificate(A, B, C, or D - as ap	d, dațed oplicable):	X			
The original and 3 copies of other plans and dr information necessary to describe the subject of	The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application: X							

28. Declaration	
I/we hereby apply for planning permission/consent as described in information.	this form and the accompanying plans/drawings and additional
Signed - Applicant: Or signed - Agent	Date (DD/MM/YYYY):
Vaen	(date cannot be pre-application)
29. Applicant Contact Details	30. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number:	Country code: National number: Extension number: 020 7832 1470
Country code: Mobile number (optional):	Country code: Mobile number (optional):
	077114 46218
Country code: Fax number (optional):	Country code: Fax number (optional):
	020 7583 2231
Email address (optional):	Email address (optional):
	valerie.scott@cgms.co.uk
31. Site Visit	
Can the site be seen from a public road, public footpath, bridleway	or other public land? Yes X No
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	X Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:	,,
Contact name:	Telephone number:
Email address:	J L