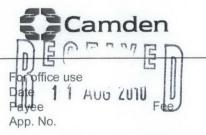
2010/4307/1

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk

Telephone

: 020 7974 1911

: 020 7974 5713



SIMON

First name:

Householder Application for Planning Permission for works or extension to a dwelling. 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

First name: MINHAZ

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

MANJI

MR.

Title:

Last name:

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

Title:

Last name:

2. Agent Name and Address

MR.

SCOTT

| Company (optional): |   | (optional): LEACH RHODES WALKER            |
|---------------------|---|--|
| Unit:               | House number: ( O House suffix:           | Unit: House number: House suffix:          |
| House name:         |   | House name:                                |
| Address 1:          | QUEENSMEAD                                | Address 1: WEST RIVERSING                  |
| Address 2:          | ST. JOHNS WOOD                            | Address 2: NEW BALLEY STREET               |
| Address 3:          |   | Address 3:                                 |
| Town:               | LONDON                                    | Town: MANCHESTER                           |
| County:             |   | County:                                    |
| Country:            |   | Country:                                   |
| Postcode:           | NW86RE                                    | Postcode: M3 5AA                           |
| 3. Descri           | ption of Proposed Works                   |  |
| Please desc         | ribe the proposed works:                  |  |
| GROU                | IND FLOOR :- SINGLE STOREY - BELOW GROUND | EXTENSION<br>ENTERTAINMENT MOON            |
| FIRST               | FLOOR : BATHNOOM EN-                      |  |
| SECON               | NO FLOOR : BATHNOOM EN-                   | SUITE EXTENSION                            |
| THIRK               | DORMA FLOOR                               | WITH MOOF LIGHT<br>NOOM TO REAR ECEVATION. |
|                     |   |  |
|                     |   |  |
|                     |   |  |

| 3. Descri                                   | ption of Proposed Works (continued)   |  |  |  |  |
|---|---|--|--|--|--|
| Has the wor                                 | rk already started? Yes No  |  |  |  |  |
| If Yes, pleas                               | e state when the work was started (DD/MM/YYYY):   | (date must be pre-application submission)  |  |  |  |
| Has the wor                                 | rk already been completed?  |  |  |  |  |
| If Yes, pleas                               | e state when the work was completed (DD/MM/YYYY):   | (date must be pre-application submission)  |  |  |  |
| 4. Site Ad                                  | ddress Details  | 5. Pedestrian and Vehicle Access, Roads and Rights of Way  |  |  |  |
| Please prov                                 | ide the full postal address of the application site.  | Is a new or altered vehicle access   |  |  |  |
| Unit:                                       | House House suffix:   | proposed to or from the public highway? Yes No  Is a new or altered pedestrian access  |  |  |  |
| House name:                                 |   | proposed to or from the public highway? Yes No   |  |  |  |
| Address 1:                                  | 10 QUEENSMEND   | Do the proposals require any diversions, extinguishments and/or creation of public rights of way?  |  |  |  |
| Address 2:                                  | ST. JOHNSWOOD   | If Yes to any questions, please show details on your plans or  |  |  |  |
| Address 3:                                  |   | drawings and state the reference number(s) of the plan(s)/drawing(s):  |  |  |  |
| Town:                                       | CONDON  |  |  |  |  |
| County:                                     |   |  |  |  |  |
| Postcode (optional):                        | NW8 6RE   |  |  |  |  |
| you were gi<br>application<br>Please tick i | e complete the following information about the advice even. (This will help the authority to deal with this more efficiently).  If the full contact details are not then complete as much possible: | development?  If Yes, please mark their position on a scaled plan and state the reference number of any plans or drawings:   |  |  |  |
| Reference:                                  |   |  |  |  |  |
|   | Date (DD MM YYYY): e-application submission) he pre-application advice received:  | Will any trees or hedges need to be removed or pruned in order to carry out your proposal?  If Yes, please show on your plans which trees by giving them numbers e.g. T1, T2 etc, state the reference number of the plan(s)/drawing(s) and indicate the scale. |  |  |  |
|   | posed works affect parking arrangements? Yes No   | 9. 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           |  |  |  |
|   |   |  |  |  |  |

|   | Existing<br>(where applicable)   | Proposed  | Not<br>applicable | Don't<br>Know |
|---|--|---|-------------------|---------------|
| Walls   | TWO-TONE BRICK<br>(FIRST 4 SECOND FLOOR)<br>BRICK<br>(GROUND FLOOR)  | THO-TONE BRICK  (FIRST A SECOND FLOOR)  WATURITY CLASS  (CROUND FLOOR). |                   |               |
| Roof  | CONCRETE THE   | CONCRETE TILE.  |                   |               |
| Windows   | TIMBER PAINTERS  | UPVC  |                   |               |
| Doors   | FRONT DOOR THURER  | BACK DOOR CLASS & ALUMINUM  |                   |               |
| Boundary treatments<br>(e.g. fences, walls)             |  |   | V                 |               |
| Vehicle access and hard-standing                        |  |   | V                 |               |
| Lighting  |  |   | 2                 |               |
| Others<br>(please specify)                              |  |   |                   |               |
| If Yes, please state refe<br>L(20) 01 EX<br>L(20) 02 PM | litional information on submitted plan(s)/drawing rences for the plan(s)/drawing(s)/design and action of the plans of the plans of the plans of the plans of the proposed crown of them. | cess statement: - SCALE (100  |                   | No            |

| 11. Ownership Certificates   |   |  |  |  |
|--|---|--|--|--|
| One Certificate A, B, C, or D, must be comple<br>CER<br>Town and Country Planning (Ge<br>I certify/The applicant certifies that on the day 21<br>owner (owner is a person with a freehold interest or  | TIFICATE OF Ceneral Develo                      | OWNERSHIP - CERT  pment Procedure)  he date of this applie | TIFICATE A  Order 1995 Certification nobody excel  | cate under Article 7 pt myself/ the applicant was the            |
| which the application relates.<br>Signed - Applicant:  | 1/  | Date (DD/MM/YYYY):   |  |  |
| Signed Applicant   |   | gned - Agent:  | will   | 05.08.10   |
|  |   |  | 1/   |  |
| Town and Country Planning (Ge<br>I certify/ The applicant certifies that I have/the ap<br>21 days before the date of this application, was the<br>left to run) of any part of the land or building to wh   | neral Develo<br>oplicant has g<br>ne owner (own | iven the requisite no<br>ner is a person with a            | Order 1995 Certification of the contract of th | se (as listed below) who, on the day                             |
| Name of Owner  |   | Address  | Date Notice Served   |  |
| Signed - Applicant:  CERTIFICAT  Town and Country Planning (General D  certify/ The applicant certifies that:  Neither Certificate A or B can be issued for this a All reasonable steps have been taken to find out interest or leasehold interest with at least 7 years le been unable to do so.  The steps taken were: |   | tion<br>ames and addresses                                 | (owner is a person with a freehold   |  |
|  |   |  |  |  |
| Name of Owner  |   | Address  |  | Date Notice Served   |
|  |   |  |  |  |
| Notice of the application has been published in the (circulating in the area where the land is situated)   | ne following n<br>):                            | newspaper  | On the following of than 21 days befo  | date (which must not be earlier re the date of the application): |
| Signed - Applicant:  | Or sig  | gned - Agent:  |  | Date (DD/MM/YYYY):   |

| 11. Ownership Certificates (co  | ntinued)  |  |  |  |  |
|---|---|--|--|--|--|
| Town and Country Plant I certify/ The applicant certifies that: Certificate A cannot be issued All reasonable steps have bee date of this application, was the    | CERTIFICATE OF OWNERSHIP - Clanning (General Development Procedu  | re) Order 1995 Certificate under ses of everyone else who, on the contract or leasehold interest with the contract of the cont | day 21 days before the<br>at least 7 years left to run |  |  |
| The steps taken were:   |   |  |  |  |  |
| Notice of the application has been pul  | olished in the following newspaper  | On the following date (wh  |  |  |  |
| circulating in the area where the land  | is situated):   | than 21 days before the da   | ite of the application):                               |  |  |
| Signed - Applicant:   | Or signed - Agent:  |  | Date (DD/MM/YYYY                                       |  |  |
| 3   |   |  |  |  |  |
|   |   |  |  |  |  |
| Agric   | AGRICULTURAL LAND DECLA nning (General Development Procedur cultural Land Declaration - You Must Com lication relates is, or is part of, an agricultu | e)Order 1995 Certificate under<br>plete Either A or B  | Article 7  |  |  |
| Signed - Applicant:   | Or signed - Agent:  |  | Date (DD/MM/YYY)                                       |  |  |
|   | 5   | aff.   | 05.08-10   |  |  |
| (B) I have/ The applicant has given the<br>before the date of this application, wa<br>as listed below:  | requisite notice to every person other that is a tenant of an agricultural holding on all   | an myself/ the applicant who, on<br>or part of the land to which this  | the day 21 days<br>application relates,                |  |  |
| Name of Tenant  | Addre   | 255  | Date Notice Served                                     |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
| Cianad Analiana   | 0 : 1 4   |  | 5 . (55 (111 1000)                                     |  |  |
| Signed - Applicant:   | Or signed - Agent:  |  | Date (DD/MM/YYY)                                       |  |  |
|   |   |  |  |  |  |
| 3. Planning Application Requ  | uirements - Checklist   |  |  |  |  |
| Please read the following checklist to n  | nake sure you have sent all the informatio application being deemed invalid. It will  | n in support of your proposal. Fa<br>not be considered valid until all i   | ilure to submit all<br>nformation required by          |  |  |
| he original and 3 copies of a ompleted and dated application form   | The original and 3 copies of a  | The correct fee:   | <u> </u>   |  |  |
| he original and 3 copies of a plan which<br>dentifies the land to which the applica<br>elates drawn to an identified scale<br>and showing the direction of North: | proposed works fall within a  | The original and 3 c   | wnership   |  |  |
| he original and 3 copies of other plans<br>nd drawings or information necessary<br>lescribe the subject of the application:                                       | to  | The original and 3 c<br>completed, dated A<br>(Agricultural Holdin   | rticle 7 Certificate                                   |  |  |

| information.<br>Signed - Applicant:            | Or signed - Agent:         | 6                 | D            | ate (DD/MM/YYYY) | :                                     |
|--|----------------------------|-------------------|--------------|------------------|---------------------------------------|
|  | 5                          | -ef               |              | 3.08.2010        | (date cannot be pre-application)      |
| 15. Applicant Contact Details                  |                            | 16. Agent Co      | ontact Detai | ls               |                                       |
| Telephone numbers                              |                            | Telephone num     | bers         |                  |                                       |
| Country code: National number:                 | Extension number:          | Country code:     | National num | lh o v           | Extension number:                     |
| National number:                               | number.                    | 0161              | 833 d        |                  | number.                               |
| Country code: Mobile number (optional):        |                            | Country code:     | Mobile numb  |                  |                                       |
| Mobile number (optional):                      |                            | 07270             | 662 4        |                  |                                       |
| Country code: Fax number (optional):           |                            |                   |              |                  |                                       |
| Country code: Fax number (optional):           |                            | Country code:     | Fax number ( | optional):       |                                       |
| Essella del ser (autiental)                    |                            | E                 |              |                  |                                       |
| Email address (optional):                      |                            | Email address (d  |              | 101110           |                                       |
|  | J                          | Smor.             | SCOTT C      | LRWID.C          | .o. UK                                |
| 17. Site Visit                                 |                            |                   |              |                  |                                       |
| Can the site be seen from a public road, publ  | lic footpath, bridleway or | other public land | ? Yes        | No               |                                       |
| If the planning authority needs to make an a   |                            |                   |              |                  | d:ff==== 4 f==== 4 h =                |
| out a site visit, whom should they contact? (A | Please select only one)    | Agent             | Applica      |                  | different from the plicant's details) |
| If Other has been selected, please provide:    |                            |                   |              |                  |                                       |
| Contact name:                                  |                            | Telephone num     | ber:         |                  |                                       |

