

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

Telephone Fax

: 020 7974 1911 : 020 7974 5713 For office use

Date

2. Agent Name and Address

Payee App. No. Fee

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.

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 name:	litle: Pirst name: DAVID
Last name:		Last name: WHITTINGTON
Company (optional):	HOLNGATE HOLDINGS LTD	Company (optional): THE LONDON PLANNING PRACTICE
Unit:	House House suffix:	Unit: House number: House suffix:
House name:		House name:
Address 1:	CIO AGENT	Address 1: CHANDOS PLACE
Address 2:		Address 2:
Address 3:		Address 3:
Town:		Town: LONDON
County:		County:
Country:		Country:
Postcode:		Postcode: WC 2N 4HG
	ption of the Proposal cribe the proposed development, including any change of	of use:
(2x	NVERSION OF A SINGLE F	PSION, INSERTION OF REAR DORMER
Has the buil	lding, work or change of use already started?	Yes No
	e state the date when building, e were started (DD/MM/YYYY):	(date must be pre-application submission)
	ding, work or change of use been completed? e state the date when the building, work	Yes No
	of use was completed: (DD/MM/YYYY):	(date must be pre-application submission)
		\$Date:: 2010-03-19 #\$ \$Revision: 2368 \$

4. Site Address Details Please provide the full postal address of the application site. Uhit: House number: 28 House suffix: House name: Address 1: EBBSFLEET ROAD Address 3: Town: Lownow County: Postcode (optional): Nw2 3NA Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing:	5. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?
Description: C. Dedectrier and Vehicle Access Pands and Bights of Way	7. Wasta Starage and Collection
6. Pedestrian and Vehicle Access, Roads and Rights of Way Is a new or altered vehicle access proposed to or from the public highway? Yes No	7. Waste Storage and Collection Do the plans incorporate areas to store and aid the collection of waste? Yes No
Is a new or altered pedestrian access proposed to or from the public highway? Yes No Are there any new public roads to be provided within the site? Yes No Are there any new public rights of way to be provided within or adjacent to the site? Yes No Do the proposals require any diversions /extinguishments and/or creation of rights of way? Yes No 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) 8. Authority Employee / Member	If Yes, please provide details: SEE DRAWINGS 303 +304 RND DESIGN AND ACCESS STATEMENT Have arrangements been made for the separate storage and collection of recyclable waste? If Yes, please provide details:
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	Do any of these statements apply to you? Yes No
·	

•	Existing (where applicable)		P	roposed		Not applicable	Don't Know
Walls	Red Brickus	enk		Red Brickwork to existing:			
Roof	Eternit Sle	œs		Cternit Slave			
Windows	White Prop PAINTED T		,	white PVCu			
Doors	WHITE PAIR TIMBER + 7			STEEL CORE I TPVC4	G DOOR		
Boundary treatments (e.g. fences, walls)	marker &	ENCING		oppen fenc			
Vehicle access and hard-standing	C000287E			CONCRETE			
Lighting						4	
Others (please specify)						W	
	I itional information on s rences for the plan(s)/di	•	_	design and access statemen	t? Yes		No
PLEASE		ornoes an			ACCESS		
10. Vehicle Parkin	_	***************************************					
				site parking spaces: proposed (including paces retained)	Difference in spaces		
Cars 2		2	2		0		
Light goods vehi public carrier veh Motorcycles	nicles						
Disability space	es						
Cycle spaces)		4	+4		
Other (e.g. Bu			<u>_</u>		•		
Other (e.g. Bu	s)						İ

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of: Mains sewer Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for information as necessary.)
Septic tank Other	Yes No
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)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the	Will the proposal increase the flood risk elsewhere? Yes
plan(s)/drawing(s):	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
13. Biodiversity and Geological Conservation	14. 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	RESIDENTIAL, USE CLASS C3
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	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application 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)? DD/MM/YYYY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)
features: Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
Yes, on land adjacent to or near the proposed development	assessment with your application.
No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
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	Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character?	
If Yes to either or both of the above, you <u>may</u> 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'.	

17. Residential Ur Does your proposal ind If Yes, please complete	clude th	e gai	n, los	or ch	nange	of use of	resider low:	ntial units? Yes		10					
Proposed Housing						Existing Housing									
Market Housing	Not known	1	Numb	per of		ooms Unknown	Total	Market Housing	Not known	1	Numb	per of		ooms Unknown	Total
Houses		•			71	OTIKITOWIT		Houses			T -		1		1
Flats and maisonettes		2	2				4	Flats and maisonettes					7		
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	+ c +	d+e	+f+g)=	7		Te	otals	(a + b	+ + + +	d+e	+f+g)=	1
			•		-									 	1
Social Rented	Not known	1	Numb 2	per of		ooms Unknown	Total	Social Rented	Not known	1	Numb	oer of		ooms Unknown	Total
Houses								Houses							
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	+ c +	d + e	+f+g)=			To	otals	(a + b	+ (+	d + e	+ f + g) =	
Intermediate	Not known	1	Numl 2	oer of		ooms Unknown	Total	Intermediate	Not known	1	Numb 2	oer of		ooms Unknown	Total
Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units			ļ		<u> </u>		
Cluster flats								Cluster flats			ļ				
Sheltered housing							<u></u>	Sheltered housing					Ì		
Bedsit/studios								Bedsit/studios							
Unknown type			j					Unknown type							
	T	otals	(a + b	+ C +	d+e	+f+g)=			T	otals	(a + b	+ C +	d+e	+ f + g) =	
Key worker	Not	-	Numl	T			Total	Key worker	Not		Numl	T			Total
	known	1	2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses			<u> </u>					Houses							-
Flats and maisonettes					-			Flats and maisonettes Live-work units	$\vdash \equiv \vdash$						
Live-work units			<u> </u>					Cluster flats							
Cluster flats											<u> </u>				
Sheltered housing							<u> </u>	Sheltered housing Bedsit/studios				-			
Bedsit/studios									1						
Unknown type		ot-l-	(0 : -		d · -	+f+ =\-		Unknown type		04-1-	(c : 1-	<u> </u>	<u> </u>	f ~\	
		otals	(u + 0	+ (+	u+e	+ f + g) =	<u> </u>		10	otals	(u + 0	+ C +	u+e	+ f + g) =	<u> </u>
Total proposed r	esiden	tial u	nits	(A +	B + C	+ D) =	4	Total existing	residen	ntial (units	(E +	F + C	i + H) =	1
TOTAL NET GAIN or	LOSS o	f RES	IDEN	TIAL	UNIT	S (Propos	ed Ho	using Grand Total - Exis	ting Ho	usin	g Gra	nd To	otal):	3	

\	• -			Non-resident in or change of u			pace? Yes	J NG
· If you	have answe	ered Yes to th	ne que	estion above ple	ase add details i	in the follow	ing table:	
	se class/type		Not applicable		Gross internal floorspace to be lost by change of use or demolition		Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Sh	ops						
	Net trad	able area:						
A2	Finano profession	cial and hal services	Q					
А3	Restaurant	ts and cafes						
A4	Drinking es	tablishments						·
A5	Hot food	takeaways						
B1 (a)	1	er than A2)						
B1 (b)		rch and opment						
B1 (c)	Light in	ndustrial						
B2	General	industrial						
B8	-	distribution						
C1		nd halls of dence						
C2	ł	institutions						
D1	1	sidential utions						
D2	Assembly	and leisure						
OTHER								
Please Specify		-						
	To	otal		100				
In add	dition, for ho	tels, resident	ial in	stitutions and ho	stels, please ad	ditionally inc	dicate the loss or gain of	rodins
	Type of use	Not applicable		ing rooms to be of use or dem	ost by change	Total room	ns proposed (including nanges of use)	Net additional rooms
C1	Hotels							
	Residential Institutions							
OTHER								
Please Specify	· · · · · · · · · · · · · · · · · · ·				The state of the s			
	19. Employment Please complete the following information regarding employees:							
				Full-time	Part-	-time		al full-time quivalent
Exi	sting emplo	yees						
Pro	posed emplo	oyees						
	20. Hours of Opening Please state the hours of opening for each non-residential use proposed:							
cus	Use			y to Friday	Saturda		Sunday and Bank Holidays	Not known
21. Site	Area							
Please sta	ate the site a	rea in hectar	es (ha	029	5 ha.			

22. Industrial or Commercial Processes and Machinery						
Please describe the activities and processes be carried out on the site and the end produplant, ventilation or air conditioning. Please type of machinery which may be installed or	cts in includ	cluding de the				
Is the proposal a waste management develo	pmei	nt? Yes	No.			
If the answer is Yes, please complete the foll	•					
	Not applicable	The total capac including engine allowance for c tonnes if solic	city of the void in eering surcharge cover or restoration I waste or litres if	and making no on material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)	
Inert landfill						
Non-hazardous landfill						
Hazardous landfill						
Energy from waste incineration						
Other incineration						
Landfill gas generation plant						
Pyrolysis/gasification						
Metal recycling site						
Transfer stations						
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	П					
Other treatment	一					
Recycling facilities construction, demolition						
and excavation waste Storage of waste						
Other waste management						
Other developments						
Please provide the maximum annual operat	ional	throughput of the	following waste	streams:		
Municipal		tinoughput of the	l lonowing waste			
Construction, demolition and e	xcava	ation				
Commercial and industr				* **		
Hazardous						
If this is a landfill application you will need t planning authority should make clear what	o pro inforr	vide further inforr nation it requires	nation before you on its website.	ur application can	be determined. Your waste	
23. Hazardous Substances						
Does the proposal involve the use or storage the following materials in the quantities state			No	Not applicab	le	
If Yes, please provide the amount of each su	bstan	ice that is involved	d:	_		
Acrylonitrile (tonnes)	E	thylene oxide (to	nnes)		Phosgene (tonnes)	
Ammonia (tonnes)	Hydı	rogen cyanide (toi	nnes)	Sulp	hur dioxide (tonnes)	
Bromine (tonnes)	I	Liquid oxygen (toı	nnes)		Flour (tonnes)	
Chlorine (tonnes) Lie	quid p	petroleum gas (toi	nnes)	Refined	white sugar (tonnes)]
Other:			Other:			
Amount (tonnes):			Amount (ton	nes):		

24. Ownership Certificates									
One Certificate A, B, C, or D, mus	t be completed, to	gether v	vith the Agr	icultu	ral Ho	ldings	Certificate	with tl	nis application form
Town and Country F I certify/The applicant certifies that o owner (owner is a person with a freeho which the application relates.	Planning (General I	Developi efore the	date of this	dure) (Order ation r	1995 (v except my:	self/ the	e applicant was the
Signed - Applicant: Or signed - Agent:								Date (DD/MM/YYYY):	
		11.	1	42			Parker	14	1310712010
	CEDTIEICA	TE OF OV	VNERSHIP -	CEDT	EICAT	ER	- Trucke		11 31 - 11019
Town and Country P I certify/ The applicant certifies that 21 days before the date of this applic left to run) of any part of the land or b	lanning (General I I have/the applican ation, was the own	Developr t has give er (<i>owner</i>	ment Proced on the requisition in the re- tris a person w	lure) (site no	Order 1 tice to	1 995 C every	one else (as	listed b	elow) who, on the day
Name of Owner	Address Date Notice Serve							Date Notice Served	
	\downarrow								
								<u> </u>	
Signed - Applicant:		Or sign	ned - Agent:						Date (DD/MM/YYYY):
								ļ	
		<u> </u>			-				
Town and Country P I certify/ The applicant certifies that: Neither Certificate A or B can All reasonable steps have be interest or leasehold interest v been unable to do so. The steps taken were:	n be issued for this a en taken to find ou	pplicatio	n nes and addr	esses (of the o	other o	wners (own	er is a p	erson with a freehold
Name of Owner			Add	ress				· · · · · ·	Date Notice Served
			$\overline{}$						
					\				
Notice of the application has been p (circulating in the area where the lan	ublished in the follo d is situated):	owing nev	wspaper		On t than	he follo 21 da	owing date ys before th	(which e date	must not be earlier of the application):
				-]				-	
Signed - Applicant:		Or sign	ned - Agent:)	L				Date (DD/MM/YYYY):
] [<u> </u>

24. Ownership Certificates (con	CERTIFICATE OF O	WNERSHIP - CERTI	FICATE D		·
Town and Country Plan	ning (General Develop	ment Procedure) O	rder 1995 Certificate under <i>F</i>	Article 7	
I certify/ The applicant certifies that: Certificate A cannot be issued for	er this application				
 All reasonable stens have been: 	taken to find out the nam	nes and addresses o	f everyone else who, on the da	y 21 days before th	ne
date of this application, was the	owner (owner is a person	with a freehold inter	est or leasehold interest with at a	least 7 years left to	run)
of any part of the land to which	this application relates, b	out I have/ the applic	cant has been unable to do so.		
The steps taken were:					
Notice of the application has been publi	ished in the following per	ucnanor	On the following date (which	n must not be earli	Δr
Notice of the application has been publicities (circulating in the area where the land is	situated):	wspapei	than 21 days before the date	of the application):
Signed - Applicant:	Or sign	ned - Agent:		Date (DD/MM/Y)	/YY):
Signed Application		,			
					_
^{25.} Agricultural Land Declarati	on				
	AGRICULTURAL	LAND DECLARATION	ON		
Town and Country Plann	ing (General Developm	ent Procedure)Ord	der 1995 Certificate under Ar	ticle 7	
Agricul	tural Land Declaration - \	ou Must Complete	Either A or B		
(A) None of the land to which the applic	ation relates is, or is part	of, an agricultural h	oldina.		
Signed - Applicant:		ned - Agent:	<u>-</u>	Date (DD/MM/Y)	/YY):
Signed Applicant.		ica rigeria.			···/;
		1.1.3.	nnina Pructice Atel	131071201	~
	T KO			, –	
(B) I have/ The applicant has given the re before the date of this application, was a as listed below:	equisite notice to every p a tenant of an agricultura	erson other than m Il holding on all or p	yself/ the applicant who, on the art of the land to which this ap	e day 21 days plication relates,	
Name of Tenant		Address		Date Notice Serv	ed
Traine or remark		7,00,00			
					İ
					- 1
C' - I A - I' A	A -:			D-+- (DD (MAA) 00	
Signed - Applicant:	Or sign	ned - Agent:		Date (DD/MM/Y)	Y Y Y):
					-
26. Planning Application Requi					
Please read the following checklist to ma	ike sure you have sent all	the information in	support of your proposal. Failu	ire to submit all	
information required will result in your a the Local Planning Authority has been su	pplication being deemed	i invalid. It will not i	be considered valid until all info	ormation required	by
The original and 3 copies of a completed		The correct	foo		
application form:		Ine correct	iee.		
The original and 2 comics of the miss whi	ich idoneilioc	The original	and 3 copies of a design and a	ccess statement,	_
The original and 3 copies of the plan whithe land to which the application relates			see help text and guidance not	tes for details):	مريد
identified scale and showing the direction		The original	and 3 copies of the completed	d, dated	
_		Ownership	Certificate (A, B, C, or D - as app	plicable):	
The original and 3 copies of other plans a information necessary to describe the su	and drawings or	The:-:	and 2 conice of the	ط طعدما	
innormation necessary to describe the su	bject of the application:		and 3 copies of the completed rtificate (Agricultural Holdings)		
		ALUCIE / CE	ancace (Agricultural Holulitys)	•	ت

27. Declaration		
information.		nis form and the accompanying plans/drawings and additional Date (DD/MM/YYYY):
Signed - Applicant:	Or signed - Agent:	Process Practice (the BIOTROLO pre-application)
28. Applicant Contact Details		29. Agent Contact Details
Telephone numbers		Telephone numbers
Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number:	Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):
		dw@londen pp.co.uk
30. Site Visit Can the site be seen from a public road, public foo If the planning authority needs to make an appoin out a site visit, whom should they contact? (<i>Please</i>	ntment to carry	other public land? res No Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:		
Contact name:		Telephone number:
Email address:		