

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 For office use

Date

Pavee 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

ease 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:	MR First name: ROBENT	Title:	MR First name: THOMAS
Last name:	WIMIAMS	Last name:	GNERVES
Company (optional):	MIVENSITY COWEGE LONDON	Company (optional):	VEVITT BEWNSTEIN ASSOCIATES
Unit:	House number: House suffix:	Unit:	House number: House suffix:
House name:	ESTATES + FACULITUES MVISHON	House name:	
Address 1:	GOWEN STWEET	Address 1:	KINGSLAND PASSAGE
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	NNDN	Town:	NONDAN
County:		County:	
Country:	NK	Country:	NK
Postcode:	WOLE GET	Postcode:	E8 2BB

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 number: 134 - 136 House suffix:	authority about this application? Yes No '			
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: GOVEN STWET	application more efficiently). Please tick if the full contact details are not			
Address 2:	known, and then complete as much as possible:			
Address 3:	Officer name: GMN GENTON			
Town: UNDON	Reference:			
County:				
Postcode (optional): WUE 6BP Description of location or a grid reference.	Date (DD/MM/YYYY): (must be pre-application submission)			
(must be completed if postcode is not known):	Details of pre-application advice received?			
Easting: Northing:	APPULANT + AGENT VISITED			
Description:	SITE WITH PLANNING OFFICER HOR			
	TO MEETING TO DISCUSS SCHEME.			
5. Description Of Your Proposal	PEEDBACK IN MEPOUT 16/01/2008			
Please provide a description of the approved development as show and date of decision in the sections below:	n on the decision letter, including the application reference number			
MYCHATIONS TO EXISTING SHOPE	CONT TO 23 GOWER PL, ENECTION OF			
NEW 2ND PLOOR AND 3MD FLOOR	UPT SHAFT TO OLD MOUSE HOUSE !			
	on at oro monse youse,			
Reference number: 2010/0478/19 Date of decision:	05/05/2010 (Date must be pre-application submission) (DD/MM/YYYY)			
Please state the condition number(s) to which this application relate				
1.	6.			
2.	7.			
3.	8. INVESTIGATION FOR PRESENCE			
4.	9.			
5.	10.			
Has the development already started?	Yes No			
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)			
Has the development been completed?	Yes No			
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)				
6. Discharge Of Condition				
Please provide a full description and/or list of the materials/details t	that are being submitted for approval:			
METHO STATEMENT + PROGNAMME OF WORKS				
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:				
	F. I			

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form: The original and 3 copies of a completed and dated application form:	original and 3 copies of other plans and drawings offormation necessary to describe the subject of the application:			
The correct fee:				
9. 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 (DD/MM/YYYY): (date cannot be pre-application)				
10. Applicant Contact Details	11. Agent Contact Details			
Telephone numbers Country code: National number: O207 670 1848 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Extension number: O207 275 7676 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):			
12. Site Visit Can the site be seen from a public road, public footpath, bridleway o If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: Contact name: Email address:	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:			