

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

Telephone

: 020 7974 1911 : 020 7974 5713 For office use

First name:

Date Payee

Fee

London WC1H 8EQ

App. No.

2. Agent Name and Address

Application for listed building consent for alterations, extension or demolition of a listed building.

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.

First name:

1. Applicant Name and Address

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:

(optional): OCTOBER (JALLEY RUST	(optional): AKS WARD LTD
Unit: House number: 24 House suffix:	Unit: House House suffix:
House name:	House name:
Address 1: OLD GLOUCESTER STREET	Address 1: ONE WEST SMITHFIELD
Address 2: London	Address 2: LONDON
Address 3:	Address 3:
Town:	Town:
County:	County:
Country: ENGLAND	Country:
Postcode: WC1N 3AL	Postcode: EC1A 9JU
3. Description of Proposed Work	
Please describe the proposals to alter, extend or demolish the listed in	
Stripping out all existing non-liwith new stud work walls with	load bearing walls and replacing
with new stud waste walls with	h increased levels of insulation
NITTI VEW STUU NOIK WAIS WITH	increased levels of insulation
to improve sound and thermal	performance
Installation of a new ensuite ba	// ₂
I will by a new ensuite ba	##1 <i>FBBW</i> 1.
	\$Date:: 2010-03-19 #\$ \$Revision: 2368 \$

3. Description of Proposed Work (continued)	4. Site Address Details		
	Please provide the full postal address of the application site.		
Has the work already started without consent? Yes No	Unit: House House suffix:		
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1: OCTOBER GALLEY Address 1: OLD GLOUGESTER STREET		
	Address 2: LONDON Address 3:		
(date must be pre-application submission)	Town:		
Has the week have	County:		
Has the work been completed without consent?	Postcode (optional): WC1N 3AL		
If Yes, please state the date when the	Description of location or a grid reference. (must be completed if postcode is not known):		
work was completed (DD/MM/YYYY):	Easting: Northing:		
	Description:		
	[
(date must be pre-application submission)			
5. Related Proposals	6. Pre-application Advice		
Are there any current applications, previous proposals or demolitions for the site? Yes No	Has assistance or prior advice been sought from the local authority about this application? Yes No		
If Yes please describe and include the planning application			
reference number(s), if known:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this		
Reference			
Description number	application more efficiently).		
Strengthening existing floor and 2008/	application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:		
Strengthening existing floor and 2008/ adaption of existing lauput to include 4778/L	Please tick if the full contact details are not known, and then complete as much as possible:		
Strengthening existing floor and 2008/ adaption at existing layout to include 4778/L new toilets.	Please tick if the full contact details are not known, and then complete as much as possible: Officer name:		
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Strengthening existing floor and 1008/ adaption of existing lauput to include 4778/L new toilets. Strengthening & leveling of the 1007/	Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Edward Jarvis		
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9. Materials							
Please provide a descri	ption of existing and proposed materials and fin	nishes to be used in the building (demolition exclud		T			
	Existing (where applicable)	Proposed	Not applicable	Don't Know			
External walls			Ø				
Roof covering							
Chimney							
Windows							
External doors							
Ceilings	lath & plaster	new acoustic ceiling system (plaster board on brangers) fried as much original ceiling to be retained.					
Internal walls	lath & plaster	to be replaced with timber study with plaster boad					
Floors	Carpet	to be replaced with corridor, new oak flooring within bedrooms					
Internal doors	timber panelled doors.	Existing doors to be replaced with simular.					
Rainwater goods							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard standing			Ø				
Lighting	Plastic pendent light filtings	to be replaced with Simular					
Others (add description)							
	itional information on submitted drawings or pla	ans? Z Yes No					
	If Yes, please state plan(s)/drawing(s) references: daning numbered LIDIHILL - 107 108 110 111 113 + dro 01 and 029						
Schedule of	L works L101414 dated U	110,111,112,113 + drg 01 and 02 une 2010.					

	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building? Yes	Do the proposed works include alterations to a listed building? Yes No
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building: Yes	No (you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building:	a) Works to the interior of the building? Yes No
-	No b) Works to the exterior of the building? Yes No
If the answer to c) is Yes:	c) Works to any structure or object fixed
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage) internally or externally?
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the
Please provide a brief description of the building or part building you are proposing to demolish:	structural support and state references for the plants//drawing(s).
	a+d) Stripping out existing internal walls as shown on drawing L101414/67 and replacing
	as shown on drawing [101414]67 and replacing
	with new see drawing LIOIHI4/108. b) Opening through brock work to form route for ventilation ductwork from bathroom extractor fan. see drawing
	b) opening through boach to form
	route for ventilation ductorack from
Why is it necessary to demolish or extend (as applicable) all	or part bathroom extractor for see drawing
of the building(s) and or structure(s)?	- L101414/113
12. Listed Building Grading	13. Immunity From Listing
12. Listed Building Grading Please state the grading (if known) of the building in the list.	13. Immunity From Listing Has a Cortificate of Immunity from Listing been sought in respect of
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Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: o	of Has a Certificate of Immunity from Listing been sought in respect o this building? Yes No Don't know
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: of one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building? Yes If Yes, please provide the result of the application:
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: of one box must be ticked) Grade I Ecclesiastical Grade II*	Has a Certificate of Immunity from Listing been sought in respect of this building? Yes No Don't know If Yes, please provide the result of the application:
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14. Certificates				
One Cert		D, must be completed v TE OF OWNERSHIP - CER	with this application form	
Certificate under Regulation 6 of the				
I certify/The applicant certifies that on	the day 21 days	before the date of this a	pplication nobody except myse	lf/ the applicant was the
owner (owner is a person with a freehold	d interest or lease	hold interest with at least	7 years left to run) of any part of	of the land or building to
which the application relates. Signed - Applicant:		Or signed - Agent: 🔥	_	Date DD/MM/YYYY):
Signed - Applicant.		or signed Agent.		
				01 /05 / 1410
Certificate under Regulat I certify/ The applicant certifies that I ha 21 days before the date of this applicati eft to run) of any part of the land or buil	ion 6 of the Plant ave/the applicant on, was the owne	has given the requisite rer for (owner is a person with a	nd Conservation Areas) Regula notice to everyone else (as listed	below) who, on the day
Name of Owner		Address		Date Notice Served
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
				-
	1			
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been interest or leasehold interest with been unable to do so.	e issued for this ap taken to find out	pplication the names and addresse	ervation Areas) Regulations 19 s of the other owners (owner is a uilding, or of a part of it , but I ha	person with a freehold
The steps taken were:				
Name of Owner		Address		Date Notice Served
Name of Owner		Address		Date Notice Served
Notice of the application has been pub (circulating in the area where the land i		wing newspaper	On the following date (whic than 21 days before the date	h must not be earlier
	- 2		21 days before the date	. or the application).
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
		!		11

14. Certificates (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE D Certificate under Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. The steps taken were: On the following date (which must not be earlier Notice of the application has been published in the following newspaper than 21 days before the date of the application): (circulating in the area where the land is situated): Date DD/MM/YYYY): Or signed - Agent: Signed - Applicant: 15. 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 other plans and drawings or The original and 3 copies of a completed and dated information necessary to describe the subject of the application: application form: The original and 3 copies of the completed dated Ownership Certificate (A, B, C, or D - as applicable): The original and 3 copies of a plan which identifies the land to which the application relates and drawn to an The original and 3 copies of a design and access statement, identified scale and showing the direction of North: if required (see help text and guidance notes for details): 16. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent: 01/06/2010 (date cannot be pre-application) 18. Agent Contact Details 17. Applicant Contact Details Telephone numbers Telephone numbers Extension Extension Country code: National number: number: Country code: National number: number: 0207 236 0161 0207 Country code: Country code: Mobile number (optional): Mobile number (optional): Country code: Country code: Fax number (optional): Fax number (optional): Email address (optional): Email address (optional): tim.martin @aksward.com 19. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry Other (if different from the **7** Agent **Applicant** out a site visit, whom should they contact? (Please select only one) agent/applicant's details) If Other has been selected, please provide: Contact name: Telephone number: 236 lim 0207 0161 tim.martin@aksward.com Email address: