

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 Pavee

Fee Application for approval of details reserved by condition. $\frac{2010}{3113}/L$

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

ou can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

ication of applications on planning authority websites

e note that the information provided on this application form and in supporting documents may be published on the prity's website. If you require any further clarification, please contact the Authority's planning department.

e complete using block capitals and black ink.

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

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3. Site Address Details Please provide the full postal address of the application site. Unit: House number: House number: House suffix: House name: KLNG'S CRONSTATION Address 1: ENTON FORM Address 2: Address 3: Town: COMON County: Postcode (optional): Nothing: Northing: Description Northing:	4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No 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: Officer name: Date (DD/MM/YYY): Must be pre-application submission) Details of pre-application advice received? DWRING REGULAR HENRIFIES UAISON MACTING					
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: RENERAMENT OF KING'S CROSS STATION						
Reference number: 206/3367/P Date of decision: 09/11/2007 (Date must be pre-application submission) (DD/MM/YYYY) Please state the condition number(s) to which this application relates: 1. (OND(TION 17 (2006/3387/P)) 6.						
2. CONDITION 32 (2006/3394(L)	7.					
3.	8.					
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 that are being submitted for approval: SEE COVER LETTER						
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:						
	\$Date:: 2010-03-19 #\$ \$Revision: 2368 5					

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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 The o completed and dated application form:	riginal and 3 copies of other plans and drawings ormation necessary to describe the subject of the application					
The correct fee:						
9. Declaration I/we hereby apply for planning permission/consent as described in thi information. Signed - Applicant: Date (DD/MM/YYYY): 14 06 2010 (date cannot be pre-application)	is form and the accompanying plans/drawings and additional Or signed - Agent:					
10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers Extension number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Extension Country code: National number: number: OO 7904 7419					
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or 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:	other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:					