•	2010/2397/P (E) Camden
	Application for approval of details reserved by condition.
	Planning (Listed Buildings and Conservation Areas) Act 1990

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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. Applican	t Name and Address	2. Agent	Name and Address
Title:	UR First name: ROCER	Title:	MR First name: PETER
Last name:	MADDOCK	Last name:	MADDOCK
Company (optional):	SWE SUEDE LIMITED	Company (optional):	GOOD SITUFF PROPERTY
Unit:	House House suffix:	Unit:	House House suffix:
House name:		House name:	
Address 1:	217 ICE WHARF	Address 1:	217 ICE WHARF
Address 2:	17 NEW WHARF RD	Address 2:	17. NEW WHARFRD
Address 3:		Address 3:	
Fown:	LONDON	Town:	LOMDON
County:	LONDON	County:	LowDon
Country:	VK	Country:	UK
ostcode:	NI 9RF	Postcode:	NI 9RF

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				
Unit: House House suffix:	authority about this application?				
House (FORMERLY 5 TO 13)	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).				
Address 1: 13 LEEKE STREET	Please tick if the full contact details are not				
Address 2:	known, and then complete as much as possible:				
Address 2:	Officer name:				
Address 3:	JENNIFER WALSH				
Town: LONDON	Reference:				
County: LONDON	2010/0057/P				
Postcode (optional): WCIX9HY	Date (DD/MM/YYYY):				
(optional): Description of location or a grid reference.	(must be pre-application submission) $O = O = O = O = O = O = O = O = O = O $				
(must be completed if postcode is not known):	Details of pre-application advice received?				
Easting: Northing:	BRING SAMPLE OF FACINE				
Description:	BRICKWORK AND SAMPLE				
	OF PROPOSED WINDOW				
	FRAME TO STAT FLOOR				
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:					
CHANGE OF USE OF SIDE OK	TENSION / CARACTER OF CLASS				
BI BUILDING TO CREATE A	TENSION / CARACTE OF CLASS TWO STOREY DAE BEORDOW				
HOUSE (CLASS C3)					
Reference number: 2010/0057/P Date of decision:	15/04/2010 (Date must be pre-application submission) (DD/MM/YYYY)				
	submission/ (be/min/ 111)				
Please state the condition number(s) to which this application relates					
1. 🗲	6.				
2. PROPOSED WINDOW FRAMES 3. PROPOSED FACING BRICKWORK	7.				
3. PROPUSED FACING BRICKWORK	8.				
4.	9.				
5.	10.				
Has the development already started?					
If Yes, please state when the development started (DD/MM/YYYY):					
Has the development been completed?					
If Yes, please state when the development was completed (DD/MM/Y	(date must be pre-application				
	submission)				
6. Discharge Of Condition					
Please provide a full description and/or list of the materials/details that	at are being submitted for approval				
SAMPLE WIDOW FRAME AND GARING BARS AND					
SAMPLE WIDON FRAME AND GARING BARS AND SAMPLE PANEL OF FACING BRICK WORK					
OMING FREE ING BRICK WORK					
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 rela	ates to:				
	1				

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						
	alid. It will not be considered valid until all information required by					
the Local Planning Authority has been submitted.	a copies of other plans and drawings or information N/A					
3 copies of a completed and dated application form:	5 CODIES OF OUTER DIALIS AND GLAWINGS OF INFORMATION					
	necessary to describe the subject of the application:					
9. Declaration	· · · · · · · · · · · · · · · · · · ·					
I/we hereby apply for planning permissio n/consent as described in this form and the accompanying plans/drawings and additional information.						
Signed - Applicant:	Or signed - Agent:					
	Pri Maddore					
Date (DD/MM/YYYY):						
07 05 20 0 (date cannot be pre-application)						
10. Applicant Contact Details	11. Agent Contact Details					
Telephone numbers	Telephone numbers Extension					
Extension Country code: National number: number:	Country code: National number: number:					
44 20 7713 1476	44 2077131476					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
	44 7768252872					
Country code: Fax number (optional):	Country code: Fax number (optional):					
NA	44 2077131476					
Email address (optional):	Email address (optional):					
NA	pélermaddock o hotmail. com					
12. 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 out a site visit, whom should they contact? (<i>Please select only one</i>)						
If Other has been selected, please provide:						
Contact name:	Telephone number:					
Email address:						

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