2010 2666 P Camden



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

Telephone Fax

: 020 7974 1911 : 020 7974 5713

Date Payee App. No.

For office use

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

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. 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:	First name:	Title:	First name:
Last name:		Last name:	
Company (optional):	PRODIGY ESTATES LTD.	Company (optional):	CG ARCHITECTS
Unit:	House number: // House suffix:	Unit:	House number: 221 House suffix:
House name:		House name:	
Address 1:	MYMMS DRIVE	Address 1:	EAST BATENET ROAD
	BROOKMANS PARK	Address 2:	BARNET
Address 3:		Address 3:	
Town:		Town:	
County:	HERETS	County:	HERTS
Country:	UK	Country:	UK
Postcode:	AL9 FAE	Postcode:	ENG 8QS

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: 145 House suffix:	l ites into			
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: IVERSON ROAD	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:			
Town: LONDON	Reference:			
County:				
Postcode (optional): NW6 2RA	Date (DD/MM/YYYY): (must be pre-application submission)			
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?			
Easting: Northing:				
Description:				
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:	NERIS) TO FOUR SELF CONTAINED FLATS			
(CLASS (3), INCLUDING THE ERECTION OF	3 DORMER WINDOWS AND 3 ROOFLIGHTS			
AT KOOF LEVEL, 3 WINDOWS AND A SET 6,	NERIS) TO FOUR SELF CONTAINED FLATS 3 DORMER WINDOWS AND 3 ROOFLIGHTS 4 DOORS AT GROUND LEVEL AND BIKE SHED IN THE GARDEN			
Reference number: 2009/2785/p Date of decision: 27/4/20/0 (Date must be pre-application submission) (DD/MM/YYYY)				
Please state the condition number(s) to which this application relate				
1. 3	6.			
2. 4	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	(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 DRAWING NUMBER 622/02				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition? Yes No				
If Yes, please indicate which part of the condition your application relates to:				

<u> </u>				
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 formation necessary to describe the subject of the application:			
The correct fee:				
9. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applicant: Date (DD/MM/YYYY): 19/05/20/0 (date cannot be pre-application)	or signed - Agent:			
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Turn			
12. Site Visit				
Can the site be seen from a public road, public footpath, bridleway o	or other public land? Yes No			
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)			
If Other has been selected, please provide:				
Contact name:	Telephone number:			
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Email address: