

Application for Planning Permission and conservation area consent for demolition in a conservation area. Town and Country Planning 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.

2. Agent Name and Address

Please complete using block capitals and black ink.

Applicant Name and Address

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

Title:	MR First name: PETER	Title:	MR First name: DAVID
Last name:	REGIS	Last name	: MACDOUGALL
Company (optional):	ASPHALTIC LAND LTD	Company (optional):	PAUL WHITLEY ARCHITECTS LTD
Unit:	House of House suffix:	Unit:	House number: House suffix:
House name:		House name:	SOPHIA HOUSE
Address 1:	REGIS ROAD	Address 1:	47H FLOOR
Address 2:	KENTISH TOWN	Address 2:	32-34 FEATHERSTONE STREET
Address 3:		Address 3:	
Town:	MONDON	Town:	LONDON
County:		County:	
Country:	UK	Country:	UK
Postcode:	NW5 3EW	Postcode:	EC1Y 80X
3. Descri	ption of the Proposal		
	ride a description of the proposal, including details of	the proposed de	emolition:
DEMOUT	TON OF EXISTING SINGLE STOREY GAR	BES AT THE	REAR OF THE SITE AND THE
ERECTIO	N OF A SINGLE FAMILY DWELLING ,	AT GROUND	FLOOR AND LOWER GROUND FLOOR
LEVEL	·		
Lastha buil	diag work or If Vo.	nlease state the	e date when building,
	se already started? Yes X No work	s or use were sta	rted (DD/MM/YYYY):
	16.4	. ,	plication submission)
			e date when the building, work completed (DD/MM/YYYY):
			plication submission)
			\$Date: 2007/08/22 15:20:04 \$ \$Revision: 1.23 \$

4. Site Address Details	5 Pro application Advise
Please provide the full postal address of the application site.	5. Pre-application Advice Has assistance or prior advice been sought from the local
Unit: House REAR OF House suffix:	authority about this application? Yes No
House	If Yes, please complete the following information about the advice
Address 1: EAST HE ATH ROAD	you were given. (This will help the authority to deal with this
	application more efficiently). Please tick if the full contact details are not
Address 2: HAMPSTDA-D	known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	KATRINA CHRISTOFOROU
County:	Reference:
Postcode NW3 1A)	2006/0036/P
(optional): 1993 189 Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission) 29th Avg. 2006.
Easting: Northing:	Details of pre-application advice received?
Description:	AD-HOC EMAIL AND TELEPHONE COMMUNICATIONS
5. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste?
Is a new or altered pedestr an access proposed	If Yes, please provide details:
to or from the public highway?	WASTE STORAGE AND COLLECTION IN THE
Are there any new public roads to be provided within the site?	FRONT COURTYARD/CAR PARK
Are there any new public rights of way to	
be provided within or adjacent to the site? Yes No	
Do the proposals require any diversions /extinguishments and/or	
creation of rights of way?	Have arrangements been made for the separate storage and collection of recyclable waste? Yes No
If you answered Yes to any of the above questions, please show	If Yes, please provide details:
details on your plans/drawings and state the reference of the plan (s)/drawings(s)	PROVISION FOR SEGREGRATED RECYCLING IN
	FRONT COURTHARD.
8. Neighbour and Community Consultation	9. Council Employee / Member
Have you consulted your neighbours or	Is the applicant or agent related to
the local community about the proposal? Yes No	any member of staff or elected member of the council? Yes No
If Yes, please provide details:	If Yes, please provide details:
AS MART OF THE PREVIOUS APPLICATION, PARTY	
WALL AWARDS HAVE BEEN ISSUED AND A PUBLIC	
CONSULTATION WAS HELD ON ON-SITE.	

10. Explanation for Proposed Demolition Work Why is it necessary to demolish all or part of the building(s) and/or structure(s)?							
			N HOUSE IN ITS FOOTPRINT				
		Manual Control of the					
11. Materials	to what mai	torials are to be used extern:	ally. Include type, colour and name for each				
Tappiicable, please sta	te Wilat illa	leffals are to be used externa	ally. Include type, colour and name for each		-,	<u> </u>	
	Existing (where app	plicable)	Proposed	Not applicable	Don't Know		
Walls	BRICK		BRICK				
Roof	FELT		SEDUM ON ASPHALT				
Windows			TIMBER/METAL WITH FRAMELESS GLAZING.				
Doors	METAL	_ GARAGE. DOOR	TIMBER/METAL				
Boundary treatments (e.g. fences, walls)	BRICK		BRICK				
Vehicle access and hard-standing	TARMA	c/concrete	GRASS-CRETE PAVING.				
Lighting	FLOOD	иент	FEATURE LIGHTING.				
Others (please specify)			CORTEN STEEL BOM, GLASS, GLASS PAVING LIGHTS, CERAMIC TILES	;			
Are you supplying add	litional info	rmation on submitted plan(s	s)/drawing(s)/design and access statement?		∑ Y	es No	
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:							
SEE ATTACHED COVERING LETTER AND DRAWING REGISTER FOR A LIST OF ALL SUPPORTING DOCUMENTS AND DRAWING REFERENCES ENCLOSED WITH THIS FORM.							
12. Vehicle Parkin	ıg						
Please provide info	rmation on	T	number of on-site parking spaces:				
Type of Vehic	:le	Total Existing	Total proposed (including spaces retained)		Difference in spaces		
Cars		5	3*				
Light goods veh public carrier vel	icles/ hicles	_					
Motorcycles	s	_					
Disability space	ces	_	\$1 of 3 is ADAPTABLE				
Cycle space:	S	_	1				
Other (e.g. Bu		_					
Other (e.g. Bu	ıs)	_					

13. Foul Sewage	14. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for information as necessary.)
Septic tank Other	∏ Yes ⊠ No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider
Are you proposing to	the risk to the proposed site.
connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a
If Yes, please include the details of the existing system on the	watercourse (e.g. river, stream or beck)? Yes No
application drawings and state references for the	Will the proposal increase
plan(s)/drawing(s):	the flood risk elsewhere?
SEE DRAWING No. 1027R/510	How will surface water be disposed of?
102/12/5/O	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer SEE SUDS REPORT AND
	HYDROGEOLOGICAL REPORT
15. Biodiversity and Geological Conservation	16. Existing Use
Is there a reasonable likelihood of the following being affected	Please describe the current use of the site:
adversely or conserved and enhanced within the application site, or	Please describe the current use of the site:
on land adjacent to or near the application site?	GARAGE FOR CARS, CAR PARK
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	Is the site currently vacant? Yes No
⊠ No	If Yes, please describe the last use of the site:
b) Designated sites, important habitats or other biodiversity	
features:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	When did this use end (if known)? (DD/MM/YYYY):
⊠ No	
	Does the proposal involve any of the following:
c) Features of geological conservation importance:	Land which is known to be contaminated? Yes X No
	Land where contamination is
Yes, on the development site	suspected for all or part of the site? A proposed use that would Yes No
Yes, on land adjacent to or near the proposed development	be particularly vulnerable
No	If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.
17. Trees and Hedges	18. Trade Effluent Does the proposal involve the need to
Are there trees or hedges on the proposed development site? Yes No	dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the	of trade effluents or waste
development or might be important as part of the local landscape character?	
If Yes to either or both of the above, you will need to provide a full	
Tree Survey, with accompanying plan before your application can	
be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with	
the current 'BS5837: Trees in relation to construction -	
Recommendations'.	

19. Residential U						•									
Does your proposal in If Yes, please complete	clude the details	ne ga of th	in, los ne cha	s or ch inges	nange in the	e of use of e tables be	resider low:	ntial units? <table-cell> 🛣 Yes</table-cell>	<u> </u>	Vο					
ı	Propos	sed	Hous	sing					Exist	ing l	Hous	ing			
Market	Not					ooms	Total	Market	Not		Numl	ber of	Bedr	ooms	Total
Housing Houses	known	1	2	3	4+	Unknown	+	Housing	known	1	2	3	4+	Unknown	
Flats and maisonettes			-	-1			1	Houses			ļ	ļ_,			
Live-work units	 _		1			<u> </u>	· ·	Flats and maisonettes				<u>/</u> ,			
			-				:	Live-work units			\vdash	N/A	k		
Cluster flats			-		<u> </u>			Cluster flats					ļ		
Sheltered housing								Sheltered housing							
Bedsit/studios			-					Bedsit/studios							i
Unknown type		-4-1-	1- 1			. 6>	4	Unknown type			<u> </u>				5
		otais	(a + c) + C +	a + e	+f+g)=	1		T	otals	(a + b) + c +	d+e	+f+g)=	ĺ
			Num	hor of	Rodr	ooms	Total		Ι	Г	Numi		Do du		br1
Social Rented	Not known		2	3	4+	Unknown		Social Rented	Not known	1	2	3		Unknown	Total
Houses								Houses							
Flats and maisonettes							7	Flats and maisonettes							1
Live-work units				N/	A			Live-work units							ť
Cluster flats				/				Cluster flats			7/	A			Ç.İ.
Sheltered housing	1							Sheltered housing							(
Bedsit/studios								Bedsit/studios							1
Unknown type							1.	Unknown type							1.
	T	otals	(a + b) + <i>c</i> +	d + e	+f+g)=			Т	otals	(a + b) + c +	d + e	+f+g)=	
Intermediate	Not known		Numl 2	ber of		ooms Unknown	Jotal	Intermediate	Not known	1	Numl 2	ber of		ooms Unknown	Total
Houses		'	1	,	-7 +	OTKIDWIT	1	Houses		-	2	3	4+	Unknown	
Flats and maisonettes			<u> </u>				ė,	Flats and maisonettes			 				j
Live-work units				N/A				Live-work units				_	/A		
Cluster flats				7,				Cluster flats					7.0		
Sheltered housing							,	Sheltered housing							
Bedsit/studios							:	Bedsit/studios							1
Unknown type							47	Unknown type							9
	T	otals	(a + b	+ c +	d + e	+f+g)=				otals	(a + b) + <i>c</i> +	d + e	+f+g)=	
															L
Key worker	Not					ooms	Total	Key worker	Not		Numl				Total
Houses	known	1	2	3	4+	Unknown		Houses	known	1	2	3	4+	Unknown	-
Flats and maisonettes			<u> </u>					Flats and maisonettes							- 7
Live-work units								Live-work units		ļ <u>.</u>		N I			
Cluster flats		_		N/v	<u> </u>		1	Cluster flats		/	[N/A	<u></u>		4.
Sheltered housing							,								
Bedsit/studios								Sheltered housing Bedsit/studios							
Unknown type							·								-
onknown type	Unknown type Unknown type Unknown type Totals $(a+b+c+d+e+f+g)=$ Totals $(a+b+c+d+e+f+g)=$														
				1 L T	u + €	· · · · · · · · · · · · · · · · · · ·				otals	(u + 0	+ (+	u + e	+ <i>i</i> + <i>g)</i> =	
Total proposed r	esident	ial u	nits	(A + I	B + C	+ D) =	1	Total existing	resider	ntial	units	(E +	F + G	i + H) =	
TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total);															

20. All	20. All Types of Development: Non-residential Floorspace						
_	ur proposal involve the lo					pace? Yes	ズ No
If yo	u have answered Yes to t				n the follow	ring table:	
Us	se class/type of use	Existing gross internal floorspace (square metres)		Gross internal to be lost by use or dem (square m	hange of lolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Shops						
	Net tradable a rea:						
A2	Financial and professional services						
А3	Restaurants and cafes						
A4	Drinking establishments						
A5	Hot food takeaways						
B1 (a)	Office (other than A2)						
B1 (b)	Research and development						
B1 (c)	Light industrial	П		N/A			
B2	General industrial						
B8	Storage or distribution						
C1	Hotels and halls of residence						
C2	Residential institutions						
D1	Non-residential						
D2	institutions Assembly and leisure				<u> </u>		
OTHER	Please specify	一					
	Total /			<u> </u>			
In ad	ldition, for hotels, residen	tial in	stitutions and ho	stels, please ad	ditionally in	dicate the loss or gain or	frooms
Use class	Type of use Not applicable		ing rooms to be I of use or dem	ost by change	Total room	s proposed (including langes of use)	Net additional rooms
C1	Hotek						
C2	Residential Institutions						
Other	Hostels	-					
21. Em	ployment						
Please c	omplete the following inf	orma	tion regarding er	mployees:		T . 10	
			Full-time	Part	time	Total full-time equivalent	Not known
 	isting employees			N/A			
Pro	posed em ployees						
22. Hours of Opening							
	se state the hours of oper	ina f	or each non-resid	ential use prop	osed:		
i icu.				· · · · · · · · · · · · · · · · · · ·		Sunday and	Not known
	Use Monday to Friday Saturday Bank Holidays Not known						
				N/A			
23. Sit	e Area						
Please st	tate the site area in hectar	es (ha	400m²	(0.04 Ha)			

24. Industrial or Commercial Processes and Machinery							
Please describe the activities and processes v	which	would					
be carried out on the site and the end produ plant, ventilation or air conditioning. Please	cts in includ	cluding de the		N/A			
type of machinery which may be installed or							
Is the proposal a waste management develo	•		Yes	⊠ No			
If the answer is Yes, please complete the foll		<u> </u>					
	Not applicable	The to	tal capa	city of the void in eering surcharge	cubic metres,	Maximum annual operational	
	t plica	allowa	nce for ϵ	cover or restoration if waste or litres if	on material (or	through put in tonnes (or litres if liquid waste)	
	No ap	tonne	S II SOIIC	waste or litres if	ilquid waste)		
Inert landfill	ᆜ						
Non-hazardous landfill							
Hazardous landfill	Щ						
Energy from waste incineration							
Other incineration			······································				
Landfill gas generation plant							
Pyrolysis/gasification					<i>f</i> -		
Metal recycling site	Щ						
Transfer stations	Ц				-/		
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites					,		
Open windrow composting					<u>'A</u>		
In-vessel composting							
Any combined mechanical biological and/	Ш						
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works							
Other treatment		/					
Recycling facilities construction, demolition and excavation waste	Ø						
Storage of waste					· · · ·		
Other waste management							
Other developments							
Please provide the maximum annual operat	ional	throughp	ut of th	e following waste	streams:		
Municipal		· · · · · · · · · · · · · · · · · · ·					
Construction, demolition and e		ation 					
Commercial and industr	rial						
Hazardous If this is a landfill application you will need t	o pro	vide furth	er infor	mation before you	ur application	can be determined. Vous warte	
planning authority should make clear what	infori	mation it r	equires	on its website.	и аррисацоп с	Lan be determined. Your waste	
25. Hazardous Substances							
Does the proposal involve the use or storage	of a	ny of					
the following materials in the quantities stat			Yes	∑ No	Not appli	cable	
If Yes, please provide the amount of each substance that is involved:							
Acrylonitrile (tonnes)	thylene o	nnes)		Phosgene (tonnes)			
Ammonia (tonnes)	Hyd	rogen cya	nide (to	nnes)] ;	Sulphur dioxide (tonnes)	
Bromine (tonnes) Liquid oxygen (1		ge π (to	nnes)]	Flour (tonnes)		
Chlorine (tonnes)	Juid	oetroleum	gas (to	nnes)	Refir	ned white sugar (tonnes)	
Other:				Other:			
Amount (tonnes):				Amount (to	nnes):		

26. Certificates				
One certificate A, B, C, or D mus Certificate under Artic	CERTIFICATE ile 7 of the Town and Co	OF OWNERSHIP - CERT Jountry Planning (Gener	FICATE A al Development Procedure) O	rder 1995 &
Regulation I certify/The applicant certifies the owner (owner is a person with a free	6 of the Planning (Liste at on the day 21 days be	d Buildings and Conser fore the date of this app	vation Areas) Regulations 199)0 ¥ the applicant was the
which the application relates.			years left to fully of ally part of	the land of building to
Signed - Applicant:		or signed - Agent.		Date (DD/MM/YYYY):
			DAY.	15.03.2010
Certificate under Artic Regulation of I certify/ The applicant certifies the 21 days before the date of this app left to run) of any part of the land of	le 7 of the Town and Co 6 of the Planning (Listed at I have/the applicant ha dication, was the owner (d Buildings and Conserv as given the requisite no owner is a person with a f	al Development Procedure) O vation Areas) Regulations 199 tice to everyone else (as listed b	oelow) whereon the day
Name of Owner		Address		Date Notice Served
		N	/A	
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):
Regulation I certify/ The applicant certifies tha S Neither Certificate A or B can b All reasonable steps have been	6 of the Planning (Liste dt: t: pe issued for this applicat to taken to find out the na	d Buildings and Conser ion mes and addresses of the	al Development Procedure) Ovation Areas) Regulations 199 e other owners (owner is a perso, or of a part of it, but I have/th	n with a freehold
Name of Owner		Address		Date Notice Served
		N/A		
Notice of the application has been (circulating in the area where the	n published in the followi land is situated):	ng newspaper	On the following date (which than 21 days before the date	must not be earlier of the application):
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):

26. Certificates (continued)			<u></u>		
*			- CERTIFICATE D		
Certificate under Article 7 of Regulation 6 of th	the Town and	Country Planning ted Buildings and	g (General Developme l Conservation Areas)	ent Procedure) O Regulations 199	rder 1995 &
I certify/ The applicant certifies that:	-	tea bananigs and	conscivation Arcas,	negulations 193	
§ Certificate A cannot be issued for this§ All reasonable steps have been taken	to find out the	names and address	ses of everyone else wh	10, on the day 21	days before the date of
this application, was the owner (owne the land to which this application rela	er is a person with	h a freehold interest	or leasehold interest wi	th at least 7 years	<i>left to run)</i> of any part o
The steps taken were:	ites, but i nave/	the applicant has t	Deen unable to do so.		
		/.1	1.		
		N	/A		
Notice of the application has been publis	hed in the follow	wing newspaper			must not be earlier
(circulating in the area where the land is	situated):		than 21 day	s before the date	of the application):
Signed - Applicant:		Or signed - Agen	t:		Date (DD/MM/YYYY):
Town and Country Planr		TURAL HOLDING		rtificato undor A	uticle 7
Agricultural Land Declaration - You Must (Complete Eithei	r A or B			rticle /
(A) None of the land to which th Signed - Applicant:	e application re	lates is, or is part o Or signed -, Agen	, , -	ng.	Date (DD/MM/YYYY):
зідней Аррікані.		OI signed -/19411	S HALBERTANDS	DUVE	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		pwa.		15.03.2010
 B) I have/The applicant has giv before the date of this application, was a t as listed below: 	en the requisite tenant of an agr	notice to every pericultural holding o	erson other than myself n all or part of the land	the applicant with the thick this app	ho, on the day 21 days olication relates,
Name of Tenant		Ac	ddress		Date Notice Served
			. 1		
			N/A		
Signed - Applicant:		Or signed - Agen	t:		Date (DD/MM/YYYY):
				· · · · · · · · · · · · · · · · · · ·	-
27. Planning Application Require	ements - Che	ecklist			
Please read the following checklist to mak	e sure you have	sent all the inform	nation in support of yo	ur proposal. Failu	re to submit all
information required will result in your ap the Local Planning Authority has been sub	omitted.	deemed invalid. It	t will not be considered	i valid untii ali into	ormation required by
3 copies of a completed and dated applica	ation form:	<u> </u>	The correct fee:		
3 copies of the plan which identifies the la			3 copies of a design and	d access statemer	nt:
the application relates drawn to an identif	fied		3 copies of the comple		7
scale and showing the direction of North:			Certificate (Agricultura		M
3 copies of other plans and drawings or in			3 copies of the complet Ownership Certificate		innlicable):
necessary to describe the subject of the ap	pplication:	<u> </u>		, _, _, _, us us u	
28. Declaration					
I/we hereby apply for planning permission information.	n/consent as de	scribed in this form	n and the accompanyin	g plans/drawings	and additional
Signed - Applicant:	Or sign	ed - Agent:		Date (DD/MM/Y	YYY):
		W//OP	James March	15.03.20	(date cannot be
		//X 1	43;		pre-application)

29. Applicant Contact Details	30. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number: Country code: Mobile number (optional):	Country code: National number: Extension number: O244 0204 250 0090 Country code: Mobile number (optional):
Country code: Fax numl: er (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
	D.MACDOUGALL@EUROPEANURBAN.COM
31. Site Visit	
Can the site be seen from a public road, public footpath, bridleway or	other public land? Yes No
If the planning authority needs to make an appointment to carry out a site visit, whom shou d they contact? (Please select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:	agains applicant a actuma,
Contact name:	Telephone number:
DAVID MACDOUGHLL	020 7050 0090.
Email address: D. MACDOUG ALL @EUROPEANURBAN.	COM