

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

Telephone

Fax

: 020 7974 1911 : 020 7974 5713 For office use

Date Payee App. No.

2. Agent Name and Address

Fee

London WC1H 8EQ

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

Town and Country Planning Act 1990

## 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.

1. Applicant Name and Address

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

Last name:	TSENTAS	Last name:	BRAND
Company (optional):	LA QUNA ENTERPRISES (	Company (optional):	
Unit:	House number: 25 House suffix:	Unit:	House number: 30 House suffix:
House name:		House name:	
Address 1:	REDINATON WOND	Address 1:	OLD BARRACK YARD
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	CONSOL	Town:	LONGON
County:		County:	
Country:		Country:	
Postcode:	A 1/12 7 01/	<b></b> []	
osteode.	NW3 7QX	Postcode:	SWIX FNP
B. Descrip	ption of the Proposal ide a description of the proposal, including deta	ils of the proposed dem	
B. Descrip	ption of the Proposal ide a description of the proposal, including deta  FRONT BOUNDARY W	ils of the proposed dem	nolition:
3. Description Please provi	ption of the Proposal ide a description of the proposal, including deta  FUONT BOUNDARY W  METHU GATES.	ils of the proposed dem	to MATCH MAWHOU16,  date when building, ed (DD/MM/YYYY):

te Address De		application	sito	5. Pre-application Advice Has assistance or prior advice been sought from the local
hit:	postal address of the House number: して	House	e	authority about this application? Yes No
House name:	number.			If Yes, please complete the following information about the advice
Address 1:	REVINATI	in ro	AU	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:				known, and then complete as much as possible:
Address 3:				Officer name:
Fown:	Con	MON		
County:		:		Reference:
Postcode (optional):				Date (DD/MM/YYYY):
Description of location must be completed if p	or a grid reference. postcode is not know	/n):	,	(must be pre-application submission)
Easting:	Northing	):		Details of pre-application advice received?
Description:				
Filows	t boundary	( wau	ζ,	
u <del>on</del>	th ampès			
i. Pedestrian and Vo		ds and Rig	hts of Way	
s a new or altered vehic o or from the public hi		Yes	No	Do the plans incorporate areas to store and aid the collection of waste?
a new or altered pede	- '	LJ		If Yes, please provide details:
o or from the public hi		Yes	No	(Sylva)
Are there any new publi provided within the site		Yes	No	GKISTING BIN STOUGE
Are there any new publ	ic rights of way to			
oe provided within or a	djacent to the site?	Yes	No	
Do the proposals requi extinguishments and/			—/	Library amounts been made for the congrete
reation of rights of wa		Yes	No	Have arrangements been made for the separate storage and collection of recyclable waste? Yes
If you answered Yes to details on your plans/d	any of the above que lrawings and state th	estions, plea e reference	ase show of the plan	If Yes, please provide details:
(s)/drawings(s)				
ı				
			Ì	
3. Neighbour and	Community Cor	sultation	)	9. Authority Employee / Member
Have you consulted yo	ur neighbours or	Yes		With respect to the Authority, I am:  (a) a member of staff  Do any of these
he local community at	out the proposal?	☐ res	No	(b) an elected member
f Yes, please provide d	etails:			(c) related to a member of staff  Yes  No  (d) related to an elected member
				If yes please provide details of the name, relationship and role
			,	

s it necessary to demolish all or part of the building(s) and/or structure(s)?								
No.								
11. Materials f applicable, please stat	te what mat	terials are to be used externa	ally. Include	type, colour and name for	r each material:		$\equiv$	
	Existing (where app	olicable)	•	Proposed	:	Not applicable	Don't Know	
Walls		FACEBRICK to MI	utc4 w	1641N HOUSE				
Roof								
Windows								
Doors		_						
Boundary treatments (e.g. fences, walls)	FRONT YOUNDARY WACK, METHE GATES							
Vehicle access and hard-standing	G-415+MVC4							
Lighting		_						
Others (please specify)		<u> </u>						
		rmation on submitted plan(s) he plan(s)/drawing(s)/design			nent? Yes		No No	
f Yes, please state references for the plan(s)/drawing(s)/design and access statement:  **JRHWINGS: NO. 054/07, 10, 11, PHOTOS								
12. Vehicle Parkin	-						=	
		the existing and proposed n Total		n-site parking spaces:  I proposed (including	Difference			
Type of Vehic	le	Existing		in spaces				
Cars Light goods vehi	icles/	3		3				
public carrier veh	nicles					···		
Motorcycles  Disability space								
Cycle spaces		• 4		4				
Other (e.g. Bu		<u> </u>						

Other (e.g. Bus)

oul Sewage	14. Assessment of Flood Risk
se state how foul sewage is to be disposed of:  Mains sewer  Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant  Are you proposing to	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes No
*	How will surface water be disposed of?
·	Sustainable drainage system Existing watercourse
,	Soakaway Pond/lake
	Main sewer
15. Biodiversity and Geological Conservation	16. Existing Use
, and the second	Please describe the current use of the site:
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	Keswent 14 L
they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	Is the site currently vacant? Yes No
or near the application site?	If Yes, please describe the last use of the site:
a) Protected and priority species:	DES 10ENTIAL
Yes, on the development site Yes, on land adjacent to or near the proposed development No	
b) Designated sites, important habitats or other biodiversity features:	When did this use end (if known)? (DD/MM/YYYY):
Yes, on the development site	Does the proposal involve any of the following:
Yes, on land adjacent to or near the proposed development	Land which is known to be contaminated? Yes Yo
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	A proposed use that would be particularly vulnerable
Yes, on land adjacent to or near the proposed development	to the presence of contamination?
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
Are there trees or hedges on the proposed development site?	Does the proposal involve the need to dispose of trade effluents or waste?  Yes  No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
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'.	

/	Propo:	sed	Hou	sing					Exist	ing i	Hous	ing			
/ Market	Not		Num	ber of	f Bedi	rooms	Total	Market	Not	I	Num	ber o	f Bedi	ooms	Tot
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknowr	
Houses			<u> </u>	<u> </u>				Houses							
Flats and maisonettes								Flats and maisonette	s 🗌						
Live-work units			ļ		<u> </u>			Live-work units							T
Cluster flats			<b>.</b>	ļ			No.	Cluster flats							
Sheltered housing			ļ		<u> </u>	,	,	Sheltered housing							
Bedsit/studios				1	L			Bedsit/studios							
Unknown type ု			<u> </u>					Unknown type							
	. Т	otals	(a+b	) + c +	d + e	(+f+g) =			T	otals	(a + t	+ C+	-d+e	+f+g)=	
						,									
Social Rented	Not known	1	Numl 2	per of	Bedr 4+	ooms Unknown	Total	Social Rented	Not known	1				ooms Unknown	Tot
Houses			-	-	41	Ulikilowii		Houses	RIOWII	1	2	3	4+	Unknown	+
Flats and maisonettes								Flats and maisonette							╁
Live-work units			<b>-</b>					Live-work units							-
Cluster flats			+					Cluster flats	+ =				<del> </del>		-
Sheltered housing								Sheltered housing			ļ				
Bedsit/studios			+	ļ				Bedsit/studios	ᅡ급				-		<del> </del>
Unknown type			<del> </del>					Unknown type			,,				<del> </del>
onkiowii type		ntals	(a+b)	+ (+	d+0	+f+g)=		Olikilowii type		ntals	$\frac{1}{(a+b)}$	+ ( +	d+e	+f+g)=	1
			(α ι σ			1719/-					(4 / 0			1119/-	<u></u>
ntermediate	Not		Numi	oer of	Bedr	ooms	Total	Intermediate	Not		Numi	er of	Bedr	ooms	Tot
	known	1	2	3	4+	Unknown		Intermediate	known	1	2	3	4+	Unknown	1
Houses			ļ					Houses					<u> </u>		<u> </u>
Flats and maisonettes			<u> </u>					Flats and maisonette	<u> </u>						<del> </del>
_ive-work units			ļ		ļ			Live-work units					_		_
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							<u> </u>
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	To	otals	(a + b	+ + + + + + + + + + + + + + + + + + + +	d+e	+f+g)=			To	otals	(a + b	+ (+	d+e	+f+g)=	<u> </u>
			Numi	oer of	Rodr	ooms	Total		Nat		Numb	oer of	Redr	ooms	Tot
(ey worker	Not known	1	2	3	4+	Unknown	Total	Key worker	Not known	1	2	3		Unknown	
louses								Houses							
lats and maisonettes								Flats and maisonettes							
ive-work units								Live-work units							
luster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Jnknown type								Unknown type							
	To	tals	(a + b	+ c +	d+e	+f+g)=			To	tals	(a + b	+ c +	d+e	+f+g)=	
								Total existing				(E +			

Il Types of Development: Non-residential Floorspace  your proposal involve the loss, gain or change of use of non-residential floorspace?  Yes									
If you have answered Yes to the question above please add details in the following table:    We   Existing gross   Gross internal floorspace   Total gross internal   Net additional gross									
, Us	se class/type	of use	Existing gross internal floorspace (square metres)		Gross internal floorspace to be lost by change of use or demolition (square metres)		floorspace proposed (including change of use)(square metres)	internal floorspace following developmen (square metres)	
A1	Sho	ops							
		ble area:							
A2	Financ profession	ial and al services			9				
А3	Restaurant	s and cafes			,				
A4	Drinking est	ablishment					7:		
A5	Hot food t	akeaways							
B1 (a)	Office (oth								
B1 (b)	Resear develo								
B1 (c)	Light in	dustrial							
B2	General i	ndustrial					,		
B8	Storage or o								
C1	Hotels an resid	d halls of ence							
C2	Residential								
D1	Non-res institu								
D2	Assembly a								
OTHER									
Please specify									
peeny	То	tal							
In ad	dition, for ho	tels, resider	ntial in	stitutions and ho	stels, please ad	ditionally inc	dicate the loss or gain of	rooms	
Use class	Type of use	Not applicable	Exist	ing rooms to be l of use or dem	ost by change olition	Total room ch	s proposed (including anges of use)	Net additional rooms	
C1	Hotels								
C2	Residential Institutions								
THER	HISCICUCIONS								
Please									
pecify									
	ployment								
lease co	omplete the	following in	forma	tion regarding en			Tot	al full-time	
				Full-time	Part-	time 		quivalent	
	sting employ								
Pro	posed emplo	yees							
2. Ho	urs of Ope	ning		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Pleas	e state the h	ours of ope	ning fo	or each non-resid	ential use prop	osed: N/A		T	
	Use		1onda	y to Friday	Saturda	<b>y</b>	Sunday and Bank Holidays	Not known	
		ı		İ		1		1	

ndustrial or Commercial Proce			ery		
se describe the activities and processes (carried out on the site and the end produ	which icts in	n would Icluding			
ant, ventilation or air conditioning. Please upe of machinery which may be installed or	includ	de the			
			No		
is the proposal a waste management develor if the answer is Yes, please complete the foll	-		No		
in the diswer is res, please complete the foil	Τ	<del></del>			
	Not applicable	including eng	pacity of the void in Jineering surcharge	and making no	Maximum annual operational through put in tonnes
	형	allowance for	or cover or restoration olid waste or litres if	on material (or liquid waste)	(or litres if liquid waste)
	Zē				
Inert landfill Non-hazardous landfill	片				
Hazardous landfill				71	
Energy from waste incineration	믐				
Other incineration		,			
Landfill gas generation plant					
Pyrolysis/gasification					
				,	
Metal recycling site  Transfer stations	片				
Material recovery/recycling facilities (MRFs)			;		
Household civic amenity sites	片				
Open windrow composting					
In-vessel composting	H				
Anaerobic digestion	片				
Any combined mechanical, biological and/ or thermal treatment (MBT)				· · · · · · · · · · · · · · · · · · ·	
Sewage treatment works					
Other treatment Recycling facilities construction, demolition	브				
and excavation waste	브				
Storage of waste					
Other waste management					
Other developments		<u> </u>	h o following wasto	ctroame	
Please provide the maximum annual operat	ionai	throughput of	ne following waste	streams:	
Municipal  Construction, demolition and e	YC3V3	ation			
Commercial and industr					
Hazardous					
If this is a landfill application you will need t planning authority should make clear what	o pro inforr	vide further info mation it requir	ormation before you es on its website.	ır application ca	n be determined. Your waste
25. Hazardous Substances					
Does the proposal involve the use or storage the following materials in the quantities state	ted be	elow? Yes	No	Not applica	able
If Yes, please provide the amount of each su				1	
Acrylonitrile (tonnes)		thylene oxide (		]	Phosgene (tonnes)
Ammonia (tonnes)		rogen cyanide ( Liquid oxygen (		j Su ]	liphur dioxide (tonnes)  Flour (tonnes)
Bromine (tonnes) Li		petroleum gas (		l Refine	d white sugar (tonnes)
Other:		,	Other:	]	
Amount (tonnes):			Amount (to	nnes):	
Minoriir (ronnes):					

certificate A, B, C, or D must be	completed, together with the Agricultural Holdings C	Certificate with this application form
/	CERTIFICATE OF OWNERSHIP - CERTIFICATE A f the Town and Country Planning (General Development	
/ Regulation 6 of t	he Planning (Listed Buildings and Conservation Areas) I	Regulations 1990
certify/The applicant certifies that on	the day 21 days before the date of this application nobod interest or leasehold interest with at least 7 years left to rur	dy except myself/ the applicant was the
Signed - Applicant:	Or signed - Apent:	Date (DD/MM/YYYY):
		23/00/09
Regulation 6 of the certify/ The applicant certifies that I had	CERTIFICATE OF OWNERSHIP - CERTIFICATE B  f the Town and Country Planning (General Development Planning (Listed Buildings and Conservation Areas) Five/the applicant has given the requisite notice to everyone, was the owner (owner is a person with a freehold interest ling to which this application relates.	Regulations 1990 e else (as listed below) who, on the day
Name of Owner	Address	Date Notice Served
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 to	ne Planning (Listed Buildings and Conservation Areas) For issued for this application taken to find out the names and addresses of the other own at least 7 years left to run) of the land or building, or of a par	ners (owner is a person with a freehold
		Sate Nation Convent
Name of Owner	Address	Date Notice Served
	·	
Notice of the application has been publicing in the area where the land is		ring date (which must not be earlier before the date of the application):
<u></u>		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

## wnership Certificates (continued) **CERTIFICATE OF OWNERSHIP - CERTIFICATE D** Certificate under Article 7 of the Town and Country Planning (General Development Procedure) Order 1995 & Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 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: Notice of the application has been published in the following newspaper On the following date (which must not be earlier (circulating in the area where the land is situated): than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 27. Agricultural Holdings AGRICULTURAL HOLDINGS CERTIFICATE Town and Country Planning (General Development Procedure) Order 1995 Certificate under Article 7 Agricultural Land Declaration - You Must Complete Either A or B (A) None of the land to which the application relates is, or is part of, an agricultural holding. Date (DD/MM/YYYY): Signed - Applicant: Or signed - Agent: (B) I have/ The applicant has given the requisite notice to every person other than myself/ the applicant who, on the day 21 days before the date of this application, was a tenant of an agricultural holding on all or part of the land to which this application relates, as listed below: **Date Notice Served** Name of Tenant **Address** Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: 28. 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 The correct fee: application form: The original and 3 copies of a design and access statement: The original and 3 copies of the plan which identifies The original and 3 copies of the completed, dated the land to which the application relates drawn to an Ownership Certificate (A, B, C, or D - as applicable): identified scale and showing the direction of North: The original and 3 copies of the completed, dated The original and 3 copies of other plans and drawings or

information necessary to describe the subject of the application:

Article 7 Certificate (Agricultural Holdings):

hereby apply for planning permission/consent as described in to rmation.  ned - Applicant:  Or signed - Agent:	his form and the accompanying plans/drawings and additional  Date (DD/MM/YYYY):  23/69/89 (date cannot be pre-application)
30. Applicant Contact Details  Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	31. Agent Contact Details  Telephone numbers  Country code: National number:  Provide: National number:  Provide: National number:  National number:  Provide: National number:  Provid
32. 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:	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)  Telephone number: