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: 020 7974 1911

For office use Date

Telephone : 020 7974 5713 Fax

Payee App. No.

Fee

Application for listed building consent for alterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas) 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.

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

itle: MARTIN	Title: First name:
11,50,0,12,1	
ast name: HVRREU	Last name:
ompany THE BEDFORD ESTATES	Company (optional):
nit: House suffix:	Unit: House House suffix:
ouse ame:	House name:
ddress 1: MONTALUE STREET	Address 1:
ddress 2:	Address 2:
ddress 3:	Address 3:
own: [ONDON	Town:
ounty:	County:
ountry:	Country:
ostcode: WCIB SBL	Postcode:
. Description of Proposed Work	
lease describe the proposals to alter, extend or demolish the	listed building(s):

The provision of additional toilet facilities including a disabled trilet to the lower grand floor redundant store room to the wear of 59/60 Runell Square, Lendon, WCI.

3. Description of Proposed Work (continu	ed)	4. Site Address Details
		Please provide the full postal address of the application site.
Has the work already started without consent?	No	Unit: House suffix: S9-60 House suffix:
Started without consent:	<u> </u>	House name:
If Yes, please state when the work was started (DD/MM/YYYY):		
Work that started (BB) thins 1111).		LUSSECC SWOTHER
		Address 2:
		Address 3:
(date must be pre-application submission)		Town:
Has the work been	,	County:
completed without consent?	No	Postcode (optional): WCB 4HJ
		Description of location or a grid reference.
If Yes, please state the date when the		(must be completed if postcode is not known):
work was completed (DD/MM/YYYY):		Easting: Northing:
		Description:
		arade II Whed Building.
(date must be pre-application submission)		
5. Related Proposals		6. Pre-application Advice
Are there any current applications, previous	N.	Has assistance or prior advice been sought from the local
proposals or demolitions for the site? Yes	No	authority about this application? Yes No
If Yes please describe and include the planning applereference number(s), if known:	ication	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Description	Reference number	application more efficiently).  Please tick if the full contact details are not
hoppication for dual one BI/DI,	KNOMH '	known, and then complete as much as possible:
		Officer name:
Application for a disabled lift to the front	NOT	
lightness.	KNOWH.	Reference:
		Date (DD/MM/YYYY): (must be pre-application submission)
		Details of pre-application advice received?
7. Neighbour and Community Consultation	'n	8. Authority Employee / Member With respect to the Authority Lam: Do any of these
Have you consulted your neighbours or the local community about the proposal? Yes	No	With respect to the Authority, I am:  (a) a member of staff  Do any of these statements apply to you?
and recommending about the proposal:	<b>V</b> 140	(b) an elected member
If Yes, please provide details:		(c) related to a member of staff (d) related to an elected member
		If yes please provide details of the name, relationship and role

External walls  Roof covering  Chimney  Windows  External doors			Y	
Chimney Windows			Y	
Windows				 
External doors			g	
Ceilings	NTED CONCREDE.	MACROBURD PHUTED CELLINGS.		
Internal walls	nto public	PAINTED PLASTER		
Floors	Nao concrue.	VINVE FLODE LONDEINKS.		
Internal doors	SH PAIGNED DOORS	fush pannto dutes.		
Rainwater goods			7	
Boundary treatments (e.g. fences, walls)			<b>Y</b>	
Vehicle access and hard standing				
Lighting	ONLIGHT BATTENT SURFACE OMED.	RECEISED DOWNLIGHTERS IN NON		
Others (add description)				
Are you supplying additional Yes, please state plan(s)/di	al information on submitted drawings or	or plans? Yes No		-

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building?  Yes  No	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building: Yes No	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building:  Yes No	a) Works to the interior of the building?
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No
If the answer to c) is Yes:	c) Works to any structure or object fixed
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage) internally or externally?  Yes  No
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)  Please provide a brief description of the building or part of the	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	structural support and state references for the plan(s)/drawing(s):
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building?  Yes  Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know 🗌	

14. Certificates				
One C			with this application for	m
Certificate under Regulation 6 of the Lordify/The applicant certifies that owner (owner is a person with a free lordifier).	ne Planning (Listed on the days	before the date of this :	ation Areas) Regulation	at mucalf/ tha analicant was th
which the application relates. Signed - Applicant:		Or signed - Agent:	,	Date DD/MM/YYYY):
for a sonar of the Ba	hond others			17/08/09
Certificate under Regularies I certify/ The applicant certifies that 21 days before the date of this applicant to run) of any part of the land or be	<b>lation 6 of the Plan</b> I have/the applicant ation, was the owne	t has given the requisite i er (owner is a person with i	and Conservation Areas)	is listed helow) who an the day
Name of Owner		Address		Date Notice Served
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
<ul> <li>Certify/ The applicant certifies that:</li> <li>Neither Certificate A or B car</li> </ul>	of the Planning (Lise) The issued for this apen taken to find out	ted Buildings and Conse pplication the names and addresse	ervation Areas) Regulations of the other owners (owners)	ons 1990
Name of Owner		Address		Date Notice Served
Notice of the application has been pu (circulating in the area where the land	ublished in the follow d is situated):	wing newspaper	On the following date than 21 days before t	e (which must not be earlier he date of the application):
Signed Applicant				
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):

Certificate under Regulation 6 of the Planning I certify/ The applicant certifies that:  Certificate A cannot be issued for this application.  All reasonable steps have been taken to date of this application, was the owner (of any part of the land to which this application).  The steps taken were:	plication find out the names owner is a person wit	and Conservatio and addresses of the a freehold intere	n Areas) Regulation everyone else who, c est or leasehold interes	on the day 2°	1 days before the st 7 years left to run)
Notice of the application has been published in t (circulating in the area where the land is situated	he following newsp	aper	On the following da than 21 days before	te (which m the date of	ust not be earlier the application):
Signed - Applicant:	Or signed	- Agent:		D	ate DD/MM/YYYY):
15. Planning Application Requirement Please read the following checklist to make sure y information required will result in your application the Local Planning Authority has been submitted. The original and 3 copies of a completed and date application form: The original and 3 copies of a plan which identifie land to which the application relates and drawn to identified scale and showing the direction of North	you have sent all the n being deemed involved in	ralid. It will not b The original and information nece The original and Ownership Certif	upport of your propo e considered valid ur 3 copies of other plan essary to describe the 3 copies of the comp icate (A, B, C, or D - a 3 copies of a design a	ntil all inforn ns and draw subject of t pleted dated ss applicable	ings or he application:
<b>16. Declaration</b> I/we hereby apply for planning permission/conse information. Signed - Applicant:		nis form and the a	ccompanying plans/	'drawings ar	nd additional
HAM. FOR A BERME OF THE BLOWNO USTATET	Or signed - Agent:		Date (E	00/MM/YYY 18/09.	Y): (date cannot be pre-application)
	Or signed - Agent:	18. Agent (		t	(date cannot be
HAM. FOR A BLEAME OF THE BLOWNO USTATE?	Extension number:	Telephone nur Country code: Country code: Country code: Email address	National number:  Mobile number (option	ptional):	(date cannot be
17. Applicant Contact Details Telephone numbers  Country code: National number:  020 7636 2885  Country code: Mobile number (optional):  Country code: Fax number (optional):	Extension	Country code: Country code: Country code:	National number:  Mobile number (option	ptional):	(date cannot be pre-application)  Extension
17. Applicant Contact Details  Telephone numbers  Country code: National number:  020 7636 2885  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  Mhurrell@bedtardestates. com.	Extension number:	Country code: Country code: Country code: Email address	Mobile number (optional):	ptional):  No Other (	(date cannot be pre-application)  Extension