

Planning Services Camden Town Hall Argyle Street

Email (enquiries only): env.devcon@camden.gov.uk

Telephone : 020 7974 1911

Fax

Date

For office use

London WC1H 8EQ

: 020 7974 5713

Payee App. No.

MR First name: CLIVE

2. Agent Name and Address

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.

First name:

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:	Last name: CHUARO.
Company (optional): THE CELIGIOUS SOCIETY OF FRIENDS	Company (optional): THOMAS & THOMAS.
Unit: House number: 173-177 House suffix:	Unit: House number: 30 House suffix:
House rame: FEIENDS MEETING HOUSE	House name:
Address 1: EUSTON ROAD	Address 1: GREEN LANE
Address 2:	Address 2:
Address 3:	Address 3:
Town: LONDON	Town: NORTHWOOD
County:	County: MIDDLESEX
Country:	Country:
Postcode: NW1 235.	Postcode: HA6 203.
3. Description of Proposed Work	
Please describe the proposals to alter, extend or demolish the listed	building(s):
REMOVAL OF INTERIOR STUP PA	RTITION BETWEEN ROOM II
AND 12 AT GROWN FLOOR T	TO BE REPLACED WITH BI-
FOLDING PARTITION DOORS.	
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	\$Date: 2009/03/23 15:29:40 \$ \$Revision: 3.7 \$

3. Description of Proposed Work (continued)	4. Site Address Details
Has the work already started without consent? If Yes, please state when the work was started (DD/MM/YYYY): (date must be pre-application submission) Has the work been completed without consent? If Yes, please state the date when the work was completed (DD/MM/YYYY): (date must be pre-application submission)	Please provide the full postal address of the application site. Unit: House number: 173-177 House suffix: House name: Fliends Meeting House Name: Address 1: EUSTON ROAD Address 2: Address 3: Town: London County: Postcode (optional): NW1 2BJ Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing: Description:
S. Related Proposals Are there any current applications, previous proposals or demolitions for the site?	6. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? Yes No 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). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?
7. Neighbour and Community Consultation Have you consulted your neighbours or the local community about the proposal? Yes No If Yes, please provide details:	8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member If yes please provide details of the name, relationship and role

Please provide a descr	iption of existing and proposed materials and fir	nishes to be used in the building (demolition exclu		
	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls				
Roof covering				
Chimney				
Windows				
External doors				
Ceilings				
Internal walls	PARTETION.			
Floors				
Internal doors		BI-FOLDING PARTITION DOORS.		
Rainwater goods				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting				
Others (add description)				
	itional information on submitted drawings or pla (s)/drawing(s) references:	ans? 💟 Yes 🔲 No		
DRNGS,				
09.1295.0	02 09.1295.03 09	9.1295.05		

9. Materials

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? a) Total demolition of the listed building: Yes No	If Yes, do the proposed works include: (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? Yes No	
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)	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	
Please provide a brief description of the building or part of the building you are proposing to demolish:	structural support and state references for the plan(s)/drawing(s):	
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	DNGS, 09.1295.01 09.1295.02 09.1295.03 09.1295.04 09.1295.05 EXTRACT FROM CONSERVATION MANAGEMENT PLAN, ILLUSTRATING ROOMS PRIOR TO PARTITIONS.	
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 No 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		

4. Certificates

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

nich the application relates.	ld interest or leasehold interest with at least 7 years left to r	gulations 1990 ody except myself/ the applicant was the land or building to
· ·		
gned - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
	1 add co	10/08/2009
ertify/ The applicant certifies that I held applicant certifies that I held applicated are before the date of this applicated.	CERTIFICATE OF OWNERSHIP - CERTIFICATE B tion 6 of the Planning (Listed Buildings and Conservation ave/the applicant has given the requisite notice to everyon, was the owner (owner is a person with a freehold interested in the content of the content of the content of the certification relates.	ne else (as listed below) wheren the day
Name of Owner	Address	Date Notice Served
gned - Applicant.	Or signed - Agent:	Date DD/MM/YYYY):
Neither Certificate A or B can b		
All reasonable steps have beer interest or leasehold interest wit been unable to do so.	be issued for this application In taken to find out the names and addresses of the other ov It hat least 7 years left to run) of the land or building, or of a p	vners (owner is a person with a freehold art of it, but I have/ the applicant has
interest or leasehold interest wit	n taken to find out the names and addresses of the other ov	vners (owner is a person with a freehold art of it, but I have/ the applicant has
interest or leasehold interest wit been unable to do so.	n taken to find out the names and addresses of the other ov	vners (owner is a person with a freehold art of it, but I have/ the applicant has
interest or leasehold interest wit been unable to do so.	n taken to find out the names and addresses of the other ov	vners (owner is a person with a freehold art of it, but I have/ the applicant has Date Notice Served
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interest or leasehold interest wit been unable to do so. ne steps taken were: Name of Owner	n taken to find out the names and addresses of the other over the at least 7 years left to run) of the land or building, or of a p	Date Notice Served wing date (which must not be earlier

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he steps taken were:	ın)
lotice of the application has been published in the following newspaper circulating in the area where the land is situated): On the following date (which must not be earlied than 21 days before the date of the application):	
igned - Applicant: Or signed - Agent: Date DD/MM/YYY	Y):
5. Planning Application Requirements - Checklist ease read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all formation required will result in your application being deemed invalid. It will not be considered valid until all information required less to be a completed and dated The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	y
oplication form: The original and 3 copies of a plan which identifies the nd to which the application relates and drawn to an lentified scale and showing the direction of North: Information necessary to describe the subject of the application: The original and 3 copies of the completed dated Ownership Certificate (A, B, C, or D - as applicable): The original and 3 copies of a design and access statement:	
6. Declaration we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional formation. gned - Applicant: Or signed - Agent: Date (DD/MM/YYYY): (date cannot pre-application)	
7. Applicant Contact Details elephone numbers ountry code: National number: D20 7.663 1000 country code: Mobile number (optional): Country code: Fax number (optional): mail address (optional): Extension number: Country code: National number: D20 85609404 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (optional): Mail Q Hearing of S. Co. Ne.	
9. Site Visit an the site be seen from a public road, public footpath, bridleway or other public land? Yes No the planning authority needs to make an appointment to carry ut a site visit, whom should they contact? (Please select only one) Other has been selected, please provide: Telephone number: CLIVE CALLARD OZO 85609404	
mail address: U, Je@ ttsurueyors, co.uk.	

4. Certificates (continued)