Planning Services

Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk : 020 7974 1911

Telephone Fax

: 020 7974 5713

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) 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.

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: MS First name: BETH	Title: MISS First name: LUCY
Last name: RICHARDSON	Last name: POTTER
Company (optional):	Company (optional): MAKTIN BRUDNIZKI DESIGN STUDIO
Unit: House number: 106-108 House suffix:	Unit: House number: House suffix:
House name:	House name: CHELSEA REACH
Address 1: REGENTS PARK ROAD	Address 1: 79-89 LOTS ROAD
Address 2: PRIMROSE HILL	Address 2:
Address 3:	Address 3:
Town: LONDON	Town: LONDON
County:	County:
Country:	Country:
Postcode: NWI BUG	Postcode: SWIO ORN

5. Site Address Details	4. Pre-application Advice	
Please provide the full postal address of the application site. House House House	Has assistance or prior advice been sought from the local authority about this application?	
Unit: House number: 106-108 House suffix:	authority about this application?	
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: REGENTS PARK ROAD	application more efficiently). Please tick if the full contact details are not	
Address 2: PRIMROSE HILL	known, and then complete as much as possible:	
Address 3:	Officer name:	
Town: LONDON	ELAINE QUIGLEY Reference:	
County:	2009/0284/P	
Postcode (optional): NW1 8UG	Date (DD/MM/YYYY):	
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?	
Easting: Northing:	The officer made the agent aware of	
Description:	conditions to approval of planning	
	permission.	
5. Description Of Your Proposal		
Please provide a description of the approved development as shown	n on the decision letter, including the application reference number	
and date of decision in the sections below:		
land repainting of render exercises at almost	wholes, balustrading at first floor level	
level and new staircases from ground fla	d extension on rear elevation at first floor	
, , ,	(Data was to a second	
Reference number: 2009 / 0 284/P Date of decision:	submission) (DD/MM/YYYY)	
Please state the condition number(s) to which this application relate	25:	
1.	6.	
2.	7.	
3.	8.	
4. Repainting façade, conditions on	9.	
5.	10.	
Has the development already started?	Yes No	
If Yes, please state when the development started (DD/MM/YYYY):	16/02/2009 (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 the	at are being submitted for approval:	
Paint and Paper Library colour chart, proposed colour 'Hathaway'		
7. Part Discharge Of Condition(s)		
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application re	Yes No	
application relates to.		
L		

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 or info	original and 3 copies of other plans and drawings ormation necessary to describe the subject of the application:	
The correct fee:		
O. Doclaration		
9. Declaration I/we hereby apply for planning permission/consent as described in the information.	is form and the accompanying plans/drawings and additional	
Signed - Applicant:	Or signed- Agent:	
	OKON	
Date (DD/MM/YYYY):		
Date (DD/WWW/111).		
22/04/2009 (date cannot be pre-application)		
10. Applicant Contact Details	11. Agent Contact Details	
Telephone numbers	Telephone numbers	
Country code: National number: Extension number:	Extension Country code: National number: number:	
National number.		
Country code: Mobile number (optional):	Country code: Mobile number (optional):	
Mobile Hamber (optional).	Country code. Mobile number (optional):	
Country code: Fax number (optional):	Country code: Fax number (optional):	
Tax named (optional).	Pax number (optional):	
Email address (optional):	Email address (optional):	
beth richardson@jamieoliver.com	lucy@mbds.net	
THE WITCH COME TO THE TOTAL COME	(INCOMPAS-ME)	
12. 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	Agent Other (if different from the	
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:	

Email address: