TOWN & COUNTRY PLANNING ACT 1971 FORM TP1

Foe £					#H1313
			Reg	jistered No	900506
Cheque/Postal Order/Cash				Received	
Receipt No. Issued					s in block letters or
PLEASE READ THE GENER	RAL NOTES BEFO	RE FILLING IN	THE FORM	return tre	original form (signed ink or biro) with 3 or
PART To be con	npleted by or on	behalf of all a	pplicants as far as app	licable and	
	here applicable)				£ 76-00
I. APPLICANT (in bloc			AGENT (if any) to wi	hom corresp	ondence should be sent
Name DR 5.	MAHMU	D.	Name DESIG	N DE	sign
Address 80 FOX	TUNE GE	EEN RD	Address 68 FOY	TUNE (REEN ROAT
LONDOR			LONI	DON	
NW6	105		NW		*************************************
Tel. No		,	Tel. No. 794	4083	Ref. US
2. PARTICULARS OF F	PROPOSAL FOR	WHICH PER	MISSION IS SOUGH	Γ	-
		_			
(a) Full address or locati of the land to which			H SENTE		
this application relate	" 80 F0	RTUNE	GREEN	KOAD	NWG.
(b) Site area	0.05	5			hectares
(c) Give details of proposition indicating the purposition for which land/building are to be used and including any change	ings MEDIC	AL B	OF EXISTIN UILDING INC	JUDIN	G AROVISION
of use,	OH MOI	2111014/	C WNSUL	211190	ROOM AND
	WEXT	MENT	SUITE ON	GROUN	b Floor,
	WEXT	MENT	SUITE ON ONAL CARE	GROUN	b Floor,
	TREATU AND A	MENT	SUITE ON	GROUN	D FLOOR, R'S BEDROOM
	AND A ON SEC	MENT DDITIOND I	SUITE ON ONAL CARE	GROUN <u>.</u> ETAKE	b Floor,
of use. (d) State whether applica	AND A ON SEC	MENT MDITIC MENT FOR TO THE PORT OF THE PO	SUITE ON ONAL CARE	GROUN ETAKE (Plun) MDEN	D FLOOR, R'S BEDROOM
of use.	AND A ON SEC	MENT DDITIC CONDON B PLANNIN	SUITE ON ONAC CARE	GROUN ETAKE (Plun) MDEN	D FLOOR, R'S BEDROOM
(d) State whether application controls any adjoining	AND A ON SEC	MENT COND 1 CONDON B PLANNIN	SUITE ON ON A CARE LOOK	GROUN ETAKE (Plun) MDEN	D FLOOR, R'S BEDROOM
(d) State whether application controls any adjoining	AND A ON SEC	MENT COND F CONDON B PLANNIN	SUITE ON ONAC CARE SUOR - X OROUGH OF CA IG AND TRANSPO DEPARTMENT 23 JAN 1990	GROUN ETAKE (Plun) MDEN	D FLOOR, R'S BEDROOM
(d) State whether application controls any adjoining	TREATURND A ON SECONT OWNS OF IT OWNS OF IT IS IN ON I	MENT COND F CONDON B PLANNIN	SUITE ON ON A CARE COOR - A OROUGH OF CA IG AND TRANSPO DEPARTMENT 23 JAN 1990	GROUN ETAKE (Plun) MDEN)RT	D FLOOR, R'S BEDROOM
(d) State whether application of so, give its location	TREATURND A ON SECONT OWNS OF IT OWNS OF IT IS IN ON I	MENT COND F CONDON B PLANNIN	SUITE ON ONAC CARE SUOR - X OROUGH OF CA IG AND TRANSPO DEPARTMENT 23 JAN 1990	GROUN ETAKE (Plun) MDEN)RT	D FLOOR, R'S BEDROOM
(d) State whether application of use. (d) State whether application of so, give its location of so, give its location (e) State whether the pro-	AND A ON SEC ant owns or ig land and in NONE	MENT COND 1 CONDON B PLANNIN	SUITE ON ONAC CARE CHOCK	GROUN ETAKE (Plun) MDEN)RT	D FLOOR, R'S BEDROOM Subwilted.
(d) State whether application of use, (d) State whether application of so, give its location (e) State whether the pro-	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT COND 1 CONDON B PLANNIN State Yes or No	SUITE ON ONAC CARE LOOK . * OROUGH OF CA OFFARTMENT 23 JAN 1990 RECEIVED ;	GROUN ETAKE (Plun) MDEN)RT	D FLOOR, R'S BEDROOM
(d) State whether application of use. (d) State whether application of so, give its location (e) State whether the pro-	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT COND 1 CONDON B PLANNIN State Yes or No	SUITE ON ONAC CARE CHOOR & OROUGH OF CA IG AND TRANSPO DEPARTMENT 23 JAN 1990 RECEIVED If "Yes" state gross floor of proposed building(s).	GROUN ETAKE (Plum) MDEN DEN DRT	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application of so, give its location (e) State whether the pro-	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT COND 1 CONDON B PLANNIN State Yes or No	SUITE ON CARE CHAC CARE CHAC CARE CHOOR GROUGH OF CA GAND TRANSPO DEPARTMENT 23 JAN 1990 RECEIVED If "Yes" state gross floor of proposed building(s). If residential developmen number of dwelling units	FROUNDETPAKE Plum'S MDEN ORT	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application of so, give its location (e) State whether the pro-	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT COND 1 CONDON B PLANNIN State Yes or No	SUITE ON CARE CHAC CHAC CHAC CARE CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC CHAC	FROUNDEN DEN DEN DEN DEN DEN DEN DEN DEN DEN	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application of so, give its location of so, give its location (e) State whether the profile or extension(s) to existing building	AND A ON SEC Int owns or Ig land and Into opposal involves:— o (s)	MENT COND F CONDON B PLANNIN State Year or No	SUITE ON CARE CHAC CARE CHOOR GROUGH OF CA G AND TRANSPO DEPARTMENT 23 JAN 1990 If "Yes" state gross floor of proposed building(s). If residential developmen number of dwelling units proposed and type if kno	FROUNDEN DEN DEN DEN DEN DEN DEN DEN DEN DEN	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application controls any adjoining if so, give its location (e) State whether the profit or extension(s) to existing building (ii) Alterations	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT OND I ONDON B PLANNIN State Yea or No	CARECTOR CAR	Plans Plans Plans Property Area Ar	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application of so, give its location of so, give its location (e) State whether the profile or extension(s) to existing building	AND A ON SEC ant owns or ig land and NONE oposal involves:-	MENT COND F CONDON B PLANNIN State Year or No	SUITE ON CARE CHAC CARE CHOOR GROUGH OF CA G AND TRANSPO DEPARTMENT 23 JAN 1990 If "Yes" state gross floor of proposed building(s). If residential developmen number of dwelling units proposed and type if kno	P(uh) P(uh) PEN PEN PRT area area of land	D FLOOR, R'S BEDROOM Subwilled.
(d) State whether application of use. (d) State whether application of use. (e) State whether the profile of use. (ii) New building(s) or extension(s) to existing building use. (iii) Alterations	AND A ON SEC ant owns or ig land and in NONE oposal involves:— o (s)	State Yea or No	CARE CARE CHAC CARE CHOCK CROUGH OF CA GAND TRANSPO DEPARTMENT 23 JAN 1970 RECEIVED If "Yes" state gross floor of proposed building(s). If residential development number of dwelling units proposed and type if known e.g. houses, bungalows, fif "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area or building(s) affected by proposed change of use (if "Yes" state gross area (if "Yes" sta	P(uh) P(uh) PRT Brea B	D FLOOR, R'S BEDROOM Subwilter.
(d) State whether application controls any adjoining if so, give its location (e) State whether the profit of extension(s) to extension(s) to existing building (ii) Alterations	AND A ON SEC ant owns or ig land and in NONE oposal involves:— o (s)	MENT OND IT IC ONDON B PLANNIN State Yea or No	CONTE ON CARE CHOCK CHOCK CROUGH OF CA C	FROUN FROUN P(uh) MDEN PRT Present state man, ats. of land if	D FLOOR, R'S BEDROOM Subwilter.

3	. P#	ARTICULARS OF APPLICATION	
		State whether this application is for State Yes or No	
	(i)	TY -	1 siting 4 external appearance 2 design 5 means of access
	• •	Full planning permission	3 landscaping
	(iii	i) Renewal of a temporary permission or permission for retention of building or	If Yes state the date and number of previous permission and identify the particular condition
		continuance of use without complying with a condition subject to which	Date Number
		planning permission has been granted.	The condition
_	(iv	Onsideration under Section 72 only (Industry)	
4.	P/	ARTICULARS OF PRESENT AND PREVIOUS	USE OF BUILDINGS OR LAND
	Sta	ate:-	
	(i)	Present use of building(s)/land REAR YF	*RD
	(ii)	If vacant the last previous use and period of use with relevant dates.	
5	11	ST ALL DRAWINGS, CERTIFICATES, DOCU	MENTS ETC: forming part of this application
.		1	
		30 FGR 010 80 FGR 011	
_	NU	TE: 4 sets to be submitted	
6.		DDITIONAL INFORMATION State Yes or No	
	(a)	Is the application for non-residential development	If Yes complete PART THREE of this form (See PART THREE for exemptions)
	(b)	Does the application include the winning and working of minerals	If Yes complete PART FOUR of this form
_	(c)	Does the proposed development involve the felling of any trees	If Yes state numbers and indicate precise position on plan
	(d)	(i) How will surface water be disposed of?	TO MAINS TRAINAGE
	1-1	(ii) How will foul sewage be dealt with?	outline permission) of the colour and type of materials to be used for
	(0)	(i) Walls BRICK: WORK TO M	ATCH EXISTING
		(ii) Roof ASPHALT,	
•		(iii) Means of enclosure BRICK WA	US
f			
ł		I/We hereby apply for (strike out whichever is inapplied to the place) of the place in the place is in the place in the pl	
ł	01	accordance therewith.	oment described in this application and the accompanying plans in
	J.	(b) planning permission to retain the building(s) already instituted as described on this applic	or work(s) already constructed or carried out, or a use of land action and accompanying plans.
	Signe	THAX JOHN	Des 200 Date 31100.
L			
		N APPROPRIATE CERTIFICATE MUST ACCOMPAN you are the ONLY owner of ALL the land, complet	
	Ce	ertificate A. If otherwise see PART TWO of this form	•
a	RTIF		ng Act 1971 ng General Development Order 1988 (as amended) INDER SECTION 27(1)(a)
		"Owner" means a	the period of 21 days ending with the date of the accompanying
	int	erest or a lessehold application nobody,	except the applicant, was the owner(121) of any part of the
		m of which 15 not land to which the apple than 7 years. CERTIFICATE U	JNDER SECTION 27(s)
		Agricul tural Holdings Cartificate	
			e application relates is, or is part of, an agricultural
		holding.)

.on behalf of∺

Signed.

90

.. Date...

PART THREE SHOULD BE COMPLETED BY ALL APPLICANTS <u>EXCEPT</u> THOSE APPLYING FOR RESIDENTIAL DEVELOPMENT, CAR PARKING, ALTERATIONS TO FACADES, ENGINEERING WORKS, CHANGES OF USE UNDER 50m², AND THOSE COMPLETING PART FOUR (THE WINNING AND WORKING OF MINERALS)

80 FORTUNE GREEN ROAD NWG

PA			
TH	IR	E	E

ADDITIONAL INFORMATION REQUIRED IN RESPECT OF APPLICATIONS FOR NON-RESIDENTIAL DEVELOPMENT

TI	IOSE QUESTION	S RELEVANT TO THE PROPOSED DE	VEL	OPMENT TO BE ANSW	/ERED					
	description of the	ustrial development, give a processes to be carried on oducts, and the type of plant be installed.	N/A.							
	scheme for which not at present so information you	rms a stage of a larger h planning permission is ught, please give what can about the ultimate se note overleaf)		*/*						
	in Greater Londo	elated to an existing use n? ain the relationship.		State Yes or No YES EXPANSION	OF MEDIC	AL CÉN	TRE			
į	4. Is this a proposal to replace existing premises in this area or elsewhere which have become obsolete, inadequate or otherwise unsatisfactory?			State Yes or No NO						
; ;	If so, please give area of such prem intentions in resp	deteile including gross fibor AMDE vises and state your PRANSPORT ect of those premises: ANSPORT DEPARTMENT	71							
5.	44 A	23 JAN1990 DECEIVED TV		xisting floor space to be ost (through demolition or change of use)	Existing floor space to be retained (if any)	Proposed additional floor space				
(a)	What is the tota buildings to wh	PECTIVED If loor space of all the lich the application relates?	Γ	NONE m2	165 m ²	65	m²			
(b)		unt of industrial floor space	T	NONE m2	NONE m2	NONE	m²			
(c)		unt of office floor space?		NONE m2	NONEm2	NONE	m²			
(d)	What is the amo	unt of floor space for retail		NONE m2	NONE m2	NONE	m²			
(e)	e) What is the amount of floor space for storage?			NONE m2	NONE m2	NONE	m²			
(f)	•	ount of floor space for		MONE m2	NONE m2	NONE	m²			
(g)	Please specify	CARETAKERS FLAT		NONE m2	45 m ²	15.	m²			
	any other uses	MEDICAL CENTRE	1	NONE m2	120 m²	50	m²			

	•						• ,	
∙6.	(i) How many (a) office (b) industrial and (c)	1	(a) C	Office	(b) Ind	lustrial	(c) Othe	er staff
	other staff will be employed on the site as a result of the development proposed?	{	м	F	м	F	M	f .
	(ii) If you have existing premises on the site, how	(0)		3			4	
	many of the employees will be new staff?	(ii)					 	
	(iii) If you propose to transfer staff from other premises, please give details of the numbers	(iii)		<u>'</u>				
	involved and of the premises affected.	1	L	1	<u> </u>	<u> </u>	J	
7.	In the case of industrial development is the application accompanied by an industrial development certificate?		State Yes or No	N/.	A .			
	If NO state why a certificate is not required.							
_		1						······································
8.	What provisions have been made for the parking, loading and unloading within the curtilage of the site? (Please show the location of such provision on the plans and distinguish between parking for operational needs and other purposes.)	N	ONE					
		 						
9.	What is the estimated vehicular traffic flow to the site during a normal working day? (Please include all vehicles except those used by individual employees driving to work.)	N	IOT K	NOWN	1.			
-		1	 		*** ** ** **			
10.	What is the nature, volume and proposed means of disposal of any trade effluents or trade refuse?		LONE					
11.	Will the proposed use involve the use or storage of any of the materials of type and quantity mentioned in General Notes for Applicants?		State Yes or No]				
	If YES state materials and approximate quantities.							
	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		_				`	
Г	ANTRO	7	201	700	**	_ (3/1/00	
L	Signed on behalf of		2744			Date		

NOTE

Question 2 Grant of the permission now sought would in no way commit the local planning authority in respect of any proposed ultimate overleaf development which the applicant may mention in answer to this question.