London Borough of Camden Planning and Communications Department

Please read the accompanying notes before completing any part of this form.

APPLICATION FOR PERMISSION TO DEVELOP L	LAND	ETC.
---	------	------

Town and Country Planning Act 1971

One completed copy of this form and four copies of plans must be

For office use only

One completed copy of this form and four copies of plans must be submitted to:- The Director of Planning & Communications	Ref. Muli7x/H
Holborn Old Town Hall 197 High Holborn, London WC1V 7BG	Date received
PART 1—to be completed by or on behalf of all applicants as far as appl	licable to the particular development.
1. Applicant (in block capitals)	Agent (if any) to whom correspondence should be sent (in block capitals)
Name SAVELLES HEALTH CENTRE (MAX FILZ) Address CLARE COURT, TUDD ST. W.C.! Tel. No. 837-3819	Name Address Tel. No.
2. Particulars of proposal for which permission or approval is so (a) Full address or location of the land to WIT NO. 52	
which this application relates and BRUNSWIC	CENTRE W.C.I.
(b) Brief particulars of proposed development	USED AS A HEALTH & SPORTS CENTRE. TIVITY BEING GENERAL EXERCISE FOR HEALTH
(c) State whether the proposal involves:— (i) New building(s) (ii) Alteration or extension (iii) Change of use (iv) Construction of a) vehicular new access to a) pedestrian highway) (v) Alteration of an) vehicular existing access) pedestrian to a highway)	• •
3. Particulars of Application (see note 3)	•
(a) State whether this application is for:— Yes or N (i) Outline planning permission	
(ii) Full planning permission YES	1 siting 3 external appearance 2 design 4 means of access
(iii) Approval of reserved matters following the grant of outline permission	If yes, state the date and number of outline permission Date Number
(iv) Renewal of a temporary permission or permission for retention of building or continuance of use without complying with a condition subject to which planning permission has been granted	If yes, state the date and number of previous permission and identify the particular condition (see note 3d). Date Number The condition

articulars of Present and Previous Use of Buildings or State	
(i) Present use of buildings/land- (ii) If vacant, the last previous use	(i) NEW EMPTY UNIT. (ii)
dditional Information	
(a) Is the application for Industrial, office, warehousing, storage or shopping purposes? (See note 5)	If yes, complete Part Z of this form
(b) Does the proposed development involve the felling of any trees? State Yes or No	If yes, indicate positions on plan
lans List of drawings and plans submitted with the application	DRAWING ENCLOSED (OUTLINE)
Note: The proposed means of enclosure, the materials and on the submitted plans, unless the application is in or	colour of the walls and roof, landscaping details etc should be clearly shown utline only
I/We hereby apply for	
	nt described in this application and the accompanying plans, and in accordance
OR *(b) planning permission to retain buildings or works	saiready constructed or carried out, or a use of land already instituted as described
	ved in the outline permission specified herein and are described in this application
Delete whichever is not applicable.	2/M/2
Date	Signed MANGE (M. FILZ) DIRECTOR OR POPULATION RAVELLES HEALTH CENTRES
	On behalf of
Note An appropriate certificate must accompany this applicate certificate will be appropriate if you are the owner or have a t	tion unless you are seeking approval to reserved matters—see Note 10. The followin tenancy of all the land. Only one copy need be completed.
Certificate under Section 27 of	the Town and Country Planning Act 1971
	respect of the fee simple of every part of the land to which the accompanying
*2. None of the land to which the applica	ation relates constitutes or forms part of an agricultural holding; or
$^{\circ}$ 2. $\frac{^{\circ}$ 1 have given the requisite	notice to every person other than
application, was a tenant of any agriculturelates, viz:—	ural holding any part of which was comprised in the land to which the application
Name of Tenant	Address Date of service of
•	notice
•	
	*On behalf of
	State (i) Present use of buildings/land (ii) If vacant, the last previous use dditional information (a) Is the application for Industrial, office, warehousing, storage or shopping purposes? (See note 5) (b) Does the proposed development involve the felling of any trees? State Yes or No State Yes or No State Yes or No Note: The proposed means of enclosure, the materials and on the submitted plans, unless the application is in o I/We hereby apply for (a) planning permission to carry out the development therewith. OR (b) planning permission to retain buildings or works on the application and the accompanying plans. OR (c) approval of details of such matters as were reser and the accompanying plans. Delete whichever is not applicable. Date. (c) appropriate certificate must accompany this application certificate will be appropriate if you are the owner or have a to the accompanying plans. Certificate under Section 27 of I hereby certify that: 1 I am the estate owner in The applicant is application relates. 2. None of the land to which the application application, was a tenant of any agriculturelates, viz:—

*Delete where inappropriate