

Planning Application - part 1



A1. Applicant Details

Organisation

Name

Title	Forename	Surname
<input type="text" value="Mr"/>	<input type="text" value="Gaby"/>	<input type="text" value="Aghajanian"/>

A1.1 Address Details

Name or flat number

Property number or name

Street

Locality

Town

County

Postal Town

Postcode

A1.2 Communication Details

Telephone No.

Nat Code	Extn No.
<input type="text" value="07989596051"/>	<input type="text"/>

Daytime Telephone No.

<input type="text"/>	<input type="text"/>
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Fax No.

<input type="text"/>	<input type="text"/>
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Email Address

DX Number

1. Site Address Details

1.1 Address Details

Name or flat number	<input type="text" value="Flat 12"/>
Property number or name	<input type="text" value="175 Glass House"/>
Street	<input type="text" value="Shaftesbury Avenue"/>
Locality	<input type="text"/>
Town	<input type="text" value="London"/>
County	<input type="text"/>
Postal Town	<input type="text"/>
Postcode	<input type="text" value="WC2H 8AN"/>
UPRN	<input type="text" value="00"/>
Location	<input type="text"/>

2. Description of the Proposed Development

Development Description

3. Type of Application

Type	<input type="checkbox"/> Outline <input type="checkbox"/> Approval of Reserved Matters <input checked="" type="checkbox"/> Full <input type="checkbox"/> Renewal of temporary permission <input type="checkbox"/> Renewal of unexpired permission <input type="checkbox"/> Removal of Condition <input type="checkbox"/> Variation of Condition											
Outline or Reserved Matters Applications. Following recent legislation changes to outline permission please read the help-text for new requirements.	Layout (Previously Siting) Scale (Previously Design) External Appearance Means of Access Landscaping	<table> <tr> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> <tr> <td><input type="checkbox"/> Yes</td> <td><input checked="" type="checkbox"/> No</td> </tr> </table>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No											
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No											
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No											
Reference Number of existing application	<input type="text"/>											
Date of previous decision (yyyy-mm-dd)	<input type="text"/>											
Condition Number	<input type="text"/>											

Proposal Type

New building(s) ☐ Yes ☒ No

Alteration or Extension to building(s)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Change of use	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Demolition	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Other operations	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

4. Access

Is existing access affected?

Pedestrian ☐ Yes ☒ No

Is a new access type proposed?

Vehicular ☐ Yes ☒ No

Pedestrian ☐ Yes ☒ No

Vehicular ☐ Yes ☒ No

Disability Access

5. Other Information

A. Planting of trees, shrubs or hedges

☐ Yes ☒ No

B. Lopping or topping of trees or the removal of trees shrubs or hedges

☐ Yes ☒ No

C. Storage of waste

☐ Yes ☒ No

6. Public Rights Of Way

Do you propose to alter or divert a Public Right of Way?

☐ Yes ☒ No

Is the site adjacent to a Public Right Of Way?

☐ Yes ☒ No

Describe the proposed alteration of the Public Right of Way

7. Materials

Walls

Roof

Site boundaries (fences, walls, etc.), driveways, paved areas and other hard surfaced areas

8. Site Area & Floor Space

Site Area

Units

☒ square metres
☐ hectares

Width of site frontage

metres

Is the application for new building works?

☐ Yes ☒ No

Please state the existing floorspace of the building

sq.m

Please state the proposed new floorspace

sq.m

Is the proposal for a change of use?

☐ Yes ☒ No

Please state the floorspace related to the change of use

sq.m

Does the proposal involve the removal or demolition of any part of the existing building?

☐ Yes ☒ No

Description of removal/demolition

9. Existing Uses

Current use of land or building

If vacant what was the land or building last used for?

10. Residential Information

Select the type of land the development is on

☐ Brown-field

☐ Green-field
☐ Part Greenfield, Part Brownfield
☒ Don't Know
☐ Yes ☒ No

Is the number of residential units changing?

If Yes, fill out the table below:

	Existing	Proposed	Net Gain
Houses or Bungalows	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Flats/Maisonettes/Apartments	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Bedsits	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

11. Interest

State the applicant's interest in the land

☒ Owner
☐ Lessee
☐ Prospective purchaser
☐ Other

If Other give details

Does the applicant own or control any adjoining land?

☐ Yes ☒ No

Has any part of the site been in council ownership?

☐ Yes ☒ No

12. Height

State the height of the new development

metres

13. Car Parking

Please fill out the car parking space details in the table below:

	Existing	Proposed	Net Gain
Car Spaces	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Goods Vehicle Spaces	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Cycle Spaces	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>
Disability Spaces	<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

14. Drainage

State method of disposal for surface water

State method of disposal for foul sewage

If septic tanks are used, have the ground conditions been investigated? If "Yes" submit the details with the application

☐ Yes ☒ No

15. Previous Applications

Any previous known applications for this proposal?

☐ Yes ☒ No

Reference Number

Date of Application (yyyy-mm-dd)

16. Details

Has the proposal for works or development already been carried out?

☐ Yes ☒ No

Is the application for any of the following purposes listed below?

Industry

☐ Yes ☒ No

Office

☐ Yes ☒ No

Warehousing

☐ Yes ☒ No

Storage

☐ Yes ☒ No

Shopping

☐ Yes ☒ No

Any commercial use involving staff/parking/operating hours

☐ Yes ☒ No

Signature

Electronically submitted; no signature required.

Certificate B

I certify that:

I have/The applicant has given the requisite notice (Notice No.1) to everyone else who, on the day 21 days before the date of the accompanying application, was the owner of any part of the building/land to which the application relates, as listed below. (Complete and print Notice No.1).

Owner Details

Organisation

KDS PENSION FUD

Owner's Name

Title

Forename

Surname

Address at which notice was served

Name or flat number

CLARGES HOUSE

Property number or name

6-12

Street

clarges street

Locality

london

Town

london

County

Postal Town

LONDON

Postcode

W1J 8HB

Date notice was served
(yyyy-mm-dd)

2007-01-30

Signatory

Signatory

Title

Forename

Surname

Mr

GABY

Aghajanian

Signature

Electronically submitted; no signature required.

Date (yyyy-mm-dd)

2007-03-21

Under the provisions of the Planning Acts, if any person issues a certificate which purports to comply with the requirements of this Act and contains a statement which he knows to be false or misleading in a material particular, he shall be guilty of an offence. Please ensure that the information you have provided is accurate.

Town and Country Planning (General Permitted Development Procedure) Order 1995

NOTICE UNDER ARTICLE 6

APPLICATION FOR PLANNING PERMISSION

(Notice 1: This notice is to be printed and served on individuals if Certificate B or C is completed)

Proposed Development at:

Name or flat number	Flat 12
Property number or name	175 Glass House
Street	Shaftesbury Avenue
Locality	
Town	London
County	
Postal Town	
Postcode	WC2H 8AN

Take notice that application is being made by

Organisation			
	Title	Forename	Surname
Name	Mr	Gaby	Aghajanian

For planning permission to:

Description of Proposed Development

Installing Air Conditionning unit on the roof of the building

Local Planning Authority to whom the application is being submitted

Camden Council

Any owner of the land or tenant who wishes to make representations about this application, should write to the Council within 21 days of the date of this notice:

2007-01-30

Signatory

	Title	Forename	Surname
Signatory	Mr	GABY	Aghajanian
Signature	Electronically submitted; no signature required.		
Date (yyyy-mm-dd)	2007-03-21		

Statement of owners' rights: The grant of planning permission does not affect owners' rights to retain or dispose of their property, unless there is some provision to the contrary in an agreement or lease.

Statement of agricultural tenants' rights: The grant of planning permission for

**non-agricultural development may affect agricultural tenants' security of tenure.
Once completed this form needs to be served on the owner(s)**

Agricultural Holdings Certificate

X None of the land to which the application relates is, or is part of, an agricultural holding. ☐ I have/the applicant has given the requisite notice to every person other than my/him/herself who, on the day 21 days before the date of this application was a tenant of an agricultural holding on all or part of the land to which the application relates as follows:

Signatory

	Title	Forename	Surname
Signatory	<input type="text" value="MR"/>	<input type="text" value="GABY"/>	<input type="text" value="AGHAJANIAN"/>
Signature	Electronically submitted; no signature required.		
Date (yyyy-mm-dd)	<input type="text" value="2007-03-21"/>		

Under the provisions of the Planning Acts, if any person issues a certificate which purports to comply with the requirements of this Act and contains a statement which he knows to be false or misleading in a material particular, he shall be guilty of an offence. Please ensure that the information you have provided is accurate.
