

## PLANNING APPLICATION FORM

### TOWN AND COUNTRY PLANNING ACT 1990

Please read accompanying notes before answering any questions. Please complete all sections in **BLACK PEN AND BLOCK CAPITALS** and answer every question

| I am applying for planning permission and declare that to the best of my knowledge all the information in this application form and on submitted plans is correct.  Signed:  Applicant/Agent (please delete)  Date: 13.07.06  FEE (please delete / insert as appropriate)  I enclose the application fee of £: £135.00  No fee is payable for the following reason: | Payee:  Amount £:                                                                                                                                                                                            |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. APPLICANT  Name TCG  Address REGUS HOUSE, WINDMILL  HILL BUSINESS PARK, WHITEHILL  WAY, SWINDON Postcode SN 5 6QR  Email Infoatablessallossblegroup.com  Tel No 01793 441429                                                                                                                                                                                     | AGENT  Name PACIFIC DESGN & BOILD  Address BUPLET HALL,  CARDIGAN LANE  LEEDS Postcode 1542LE  Email simma pacificals. com  Tel No. 0113 274 63 00  Mobile 077 99 69 7754  Contact Name / Ref  SIMON WARREN. |
| 2-2 0.                                                                                                                                                                                                                                                                                                                                                              | NDON BOROUGH OF CAMDEN ENVIRONMENT DEPT.  10 AUG 2006  Postcode HOLL BOR.  re? Yes   No 2006                                                                                                                 |

| 3a. DESCRIPTION OF DEVELOPMENT FOR WHICH APPLICATION IS MADE  ERECTION OF FIRE ESCAPE FROM BASEMENT YARD  TO GROW PLOOP, 2 WINDOWS MADE INTO DOORS FOR  FIRE ESCAPE.  1ST PLOOR ROOF TOP GARDEN WITH BALLSTRADING &  LARGE UMBRELLA. |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 3b. PRESENT USE(S) OF LAND OR PROPERTY                                                                                                                                                                                               |
| PUBLIC HOUSE                                                                                                                                                                                                                         |
| 4. TYPE OF APPLICATION (tick as appropriate)  A                                                                                                                                                                                      |
| EXISTING DUG 982/01                                                                                                                                                                                                                  |
| PROPOSED DWG 982/02                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                      |
|                                                                                                                                                                                                                                      |
| Please specify type and colour of external materials here (or in a covering letter) and on your plans.  FIRE FSCAPE PAINTED BLACK METAL  POOCES PAINTED                                                                              |
| BALLST EADING STAINED & POLISHED                                                                                                                                                                                                     |
|                                                                                                                                                                                                                                      |

| 6. ADDITIONAL INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                 |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------------------------------------------------------------------------------------------------------------------|
| If any of the answers below is yes, the details should application drawings.                                                                                                                                                                                                                                                                                                                                              | d be clearly                              | identif                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ied on the                 |                                                                                                                         |
| - Does the proposal involve the felling or lopping of tree If yes, specify works proposed                                                                                                                                                                                                                                                                                                                                 | s?                                        | Yes 🗆                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | No B                       |                                                                                                                         |
| Does the proposal involve a new or altered access from a public highway?  Vehicular: Yes □ No. Pedestrian: Yes □ No.                                                                                                                                                                                                                                                                                                      | 00                                        | ар                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | es the propoublic right of |                                                                                                                         |
| Have arrangements been made for refuse storage? Have arrangements been made for recyclable waste?                                                                                                                                                                                                                                                                                                                         |                                           | Yes □<br>Yes □                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | No D                       |                                                                                                                         |
| Does the proposal take account of the needs of people volume Not applicable ☐ If not state reason why                                                                                                                                                                                                                                                                                                                     | with disabilit                            | ies?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes                        | No D                                                                                                                    |
| Does the proposal provide for a means of escape in cas                                                                                                                                                                                                                                                                                                                                                                    | e of fire?                                | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes ☑ No □                 |                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                           |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            |                                                                                                                         |
| Please state the number of parking spaces: existing                                                                                                                                                                                                                                                                                                                                                                       | 14/A                                      | propose                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | d N/A                      |                                                                                                                         |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE                                                                                                                                                                                                                                                                                                                                                                                   |                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                            | tos?                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                           | ries to which                             | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                            |                                                                                                                         |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor                                                                                                                                                                                                                                                                                                                         | ries to which                             | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             |                                                                                                                         |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts)                                                                                                                                                                                                                                                               | ries to which                             | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             |                                                                                                                         |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts Retail (A1)                                                                                                                                                                                                                                                    | ries to which                             | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             | ross<br>m <sup>2</sup>                                                                                                  |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts  Retail (A1) Financial / Professional Services (A2)                                                                                                                                                                                                            | ries to which                             | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             | m <sup>2</sup>                                                                                                          |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts  Retail (A1) Financial / Professional Services (A2) Restaurants, Cafes, Snack bars (A3)                                                                                                                                                                        | ries to which s.) Existing 9 (state if va | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             | m <sup>2</sup><br>m <sup>2</sup><br>m <sup>2</sup>                                                                      |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts  Retail (A1) Financial / Professional Services (A2) Restaurants, Cafes, Snack bars (A3) Pubs and Bars (A4) Hot Food Takeaways (A5) Offices                                                                                                                     | ries to which s.) Existing 9 (state if va | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             | m <sup>2</sup><br>m <sup>2</sup><br>m <sup>2</sup><br>m <sup>2</sup>                                                    |
| 7. ALL TYPES OF DEVELOPMENT: FLOORSPACE  What is the amount of floorspace in the following categor (If vacant please state last known uses and give amounts Retail (A1)  Financial / Professional Services (A2)  Restaurants, Cafes, Snack bars (A3)  Pubs and Bars (A4)  Hot Food Takeaways (A5)  Offices Industrial                                                                                                     | ries to which s.) Existing 9 (state if va | this ap                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | plication rela             | m <sup>2</sup>                |
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| 8. DEVELO            | PMENT INV     | OLVING RESIDE                             | NTIAL USE (INCL                         | UDING CONV         | ERSION)                                       |
|----------------------|---------------|-------------------------------------------|-----------------------------------------|--------------------|-----------------------------------------------|
| - Please giv         | ve the number | er of <u>existing</u> resid               | lential units on the                    | site: N/A          | 5 -                                           |
| Single fami          | ly dwelling h | ouses S  Number vacant                    | Self contained flats                    | and maisonet       | tes                                           |
| - Please de          | scribe the na | ature of any reside                       | ntial use not includ                    | ded in the abov    | ve categories:                                |
|                      |               | er and size (by nur<br>non-self contained |                                         | of <u>proposed</u> | residential units on the                      |
|                      | Single        | family dwelling houses                    | Self contained fla                      |                    | Studio/Bedsits                                |
| 1 bedroo             | om            |                                           | 11.0.00.101.0                           |                    |                                               |
| 2 bedroor            |               |                                           |                                         |                    |                                               |
|                      |               |                                           |                                         |                    |                                               |
| 3+ bedroor           |               |                                           |                                         |                    |                                               |
| TOTA                 | AL            |                                           |                                         |                    |                                               |
| If yes, how          | many?         |                                           |                                         |                    |                                               |
| 9. INFORM            | MATION REL    | ATING TO NON-                             | RESIDENTIAL DE                          | VELOPMENT          | S                                             |
| - Does the equipment |               | lude the installation                     | on of plant, ventilat                   | ion ducting or     | air conditioning                              |
| form of a c          |               | r, manufacturers's                        |                                         |                    | n the drawings or in the acoustic information |
| Does the p           |               | ide for loading an                        | d unloading within                      | the site? (if ye   | es, identify on plan)                         |
| Please giv           |               | T                                         | enter the site on a                     | normal working     | g day.                                        |
|                      | HGV           | Other vehicles                            |                                         | HGV                | Other vehicles                                |
| Existing             |               |                                           | Proposed                                |                    |                                               |
|                      |               |                                           | ardous materials?                       |                    |                                               |
| ,, p                 |               |                                           | , , , , , , , , , , , , , , , , , , , , |                    |                                               |

### 10. SITE OWNERSHIP

If you are the <u>sole</u> owner of the land to which the application relates complete Certificate A
below (Owner means a person having a freehold or leasehold interest with at least 7 years
unexpired).

This Certificate is not appropriate unless you are the sole owner.

- If you are not the sole owner of the land or if any part of the development goes outside land in your ownership, (even if only foundations) you must complete **Certificate B** below and serve notice on each of the owners, using the wording in Notice 1 below
- If you do not know the names of all or any of the owners you will need to complete Certificate C or D which will be sent to you on request.
- It is an offence knowingly or recklessly to complete a false or misleading certificate

# CERTIFICATE A Under Section 66 of the Town and Country Planning Act 1990 I certify that:

1. at the beginning of the period of 21 days ending with the date of this application nobody, except the applicant, was the owner of any part of the land to which this application relates.

| 2. none of the land to which this               | application relates is, or is part of | of an agricultural holding.      |
|-------------------------------------------------|---------------------------------------|----------------------------------|
| Signed .                                        | Dat                                   | e 13.07.06                       |
| on behalf ofTCG                                 |                                       |                                  |
|                                                 | OR                                    |                                  |
| CERTIFICATE B Under Sector of the Certify that: | tion 66 of the Town and Countr        | ry Planning Act 1990             |
| 11                                              |                                       |                                  |
| Owner(s) name                                   | Address at which notice was served    | Dates on which notice was served |
| 2. none of the land to which this               | application relates is, or is part of | of, an agricultural holding.     |
|                                                 |                                       |                                  |
| Signed                                          | Date                                  |                                  |
| on behalf of                                    |                                       |                                  |

| NOTICE No. 1 Under Section 66 of the Town and Country Planning Act 1990                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Proposed development at (a) THE BUCKS HEAD ZOZ CAXX DEOV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| FIGHT DONPON NWI BOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Laive notice that (b) PONCH TAVERNS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| is applying to Camden Council for planning permission to: (c) FRECT A MEIN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| FIRE ESCAPE & FIRE DOORS . ALSO A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| ROOF GARDEN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Any owner of the land who wishes to make representations about this application should write to Planning, Development Control, Camden Town Hall, Argyle Street, London WC1H 8ND within 21 days of the date of service of this notice.                                                                                                                                                                                                                                                                                                                                                                      |
| Insert:  (a) address or location of the proposal development (b) applicant's name (c) description of the proposed development                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Signed Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| an habels of TCG.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| on behalf of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| If yes, and you have already received an acknowledgment, please give our Reference Number:  Do you want your application to be considered as a re-submission of an earlier application that was either refused or withdrawn?  Yes No  If yes, please give our registered number and the date that your earlier application was either refused / withdrawn (please delete as appropriate):  Ref No:  Date:  Have you submitted any other application in connection with this application? Yes No (eg for: Listed Building, Conservation Area, or Control of Advertisement Consent)  If yes, please specify: |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12. RELATIVE OF A COUNCIL EMPLOYEE / MEMBER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 12. KELATIVE OF A COUNCIL EMPLOTEE / MILMIDER                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Is the application submitted by or on behalf of a Councillor (or their spouse / partner) or any Council employee (or their spouse / partner)?                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Yes \( \text{No } \text{V}                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |

### CHECK LIST

PLEASE USE THIS LIST TO CHECK THAT YOUR APPLICATION FOR PLANNING PERMISSION HAS BEEN COMPLETED CORRECTLY.

PLEASE SEE APPLICANT'S GUIDE TO SUBMITTING A VALID APPLICATION.

Have you provided 5 copies of plans for each separate application showing clearly and accurately, to a metric scale, the existing site or building (including uses) and what changes you intend to make? 10 in total if submitting a listed building application, a conservation area consent application or an application for advertisement consent.

Have you provided 5 copies of a location plan, drawn to scale with the site outlined in red, and any land in the same ownership outlined in blue?

☐ Have you provided enough information including good quality photographs clearly labelled of the site, so that your proposals can be fully understood?

Have you signed, dated and fully completed 5 copies of the application form for each separate application?

Have you given full information on who owns the land involved? Have the correct notices been served on the owners?

Is the correct fee attached? (See separate list of fees available on website: www.camden.gov.uk/planning)

#### Please note:

If you cannot put a tick to every question, your application is probably incomplete and cannot be dealt with if submitted.

### Please send your completed form and drawings to:

Planning
Development Control
Camden Town Hall
Argyle Street
London WC1H 8ND

our website: www.camden.gov.uk/planning

or by hand to Culture and Environment Reception Desk, 5th Floor, at the above address