

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

Telephone : 020 7974 1911 Fax

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For office use Date Pavee

App. No.

Fee

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address			
Title:	MR First name: WIU		
Last name:	COLTHOPPE		
Company (optional):	APHENT LLP		
Unit:	House number: House suffix:		
House name:	STABLE STREET		
Address 1:			
Address 2:			
Address 3:			
Town:	reguen		
County:			
Country:	UK		
Postcode:	NIC 4AB		

2. Agent Name and Address			
Title:	MR First name: FEFF		
Last name:	CAPTER		
Company (optional):	BAM DESIGN		
Unit:	House number: ARIE 4 House suffix:		
House name:	BAM SITE OFFICES		
Address 1:	ZONE'B'		
Address 2:	LOODS WITH		
Address 3:			
Town:	LONDON		
County:			
Country:	CK		
Postcode:	NIC FOR		

3. Site Address Details	4. Pre-application Advice			
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local			
Unit: House House suffix:	authority about this application? Yes No			
House name: BUILDING E1	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: KINGS CROSS CENTRAC	application more efficiently). Please tick if the full contact details are not			
Address 2: DEVELOPMENT ZONE E	known, and then complete as much as possible:			
Address 3: PANCRAS ROXD	Officer name: ALAN WITO			
Town: LONDON	Reference:			
County:	EMAILS			
Postcode (optional): NIC 4UR	Date (DD/MM/YYYY):			
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?			
Easting: Northing: Description:	DISCUSSIONS RE! CAMERA			
5. Description Of Your Proposal Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below: THEOTION OF 6 STOKEY BUILDING WITH BASEMENT LEVEL AND NEW WHAP ADDITION TOTAL 3.798 W OFFICE (CLASS BI) 217 M ² PETAIL CLASS AI, AZ, A3, A4, A5) RF. 2004/2307/P 72/12/2006				
(CLASS A1, A2, #3, #4, #5) REF. 2004/2307/P 22/12/2006.				
Reference number: 20/2/4/47/P Date of decision: Please state the condition number(s) to which this application relat	submission) (DD/MM/YYYY)			
1. 3(e) CCTV CAMBRA.	6.			
2.	7.			
3.	8.			
4.	9.			
5.	10.			
Has the development already started?	Yes No			
If Yes, please state when the development started (DD/MM/YYYY): [25/01/20 (3) (date must be pre-application submission)				
Has the development been completed? Yes No				
If Yes, please state when the development was completed (DD/MM/YYYY): 30/6/2014 (date must be pre-application submission)				
6. Discharge Of Condition				
Please provide a full description and/or list of the materials/details t	hat are being submitted for approval:			
3(e) Détails of cett camera.				
7. Part Discharge Of Condition(s)				
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to:				
N/A.	N/A.			

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8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed inv the Local Planning Authority has been submitted.	
The original and 3 copies of a Completed and dated application form: The original and 3 copies of a Completed and dated application form:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:
The correct fee:	
9. Declaration I/we hereby apply for planning permission/consent as described in the information. Signed - Applicant: Date (DD/MM/YYYY): (date cannot be pre-application)	or signed - Agent:
10. Applicant Contact Details	11. Agent Contact Details
Telephone numbers Country code: National number: AAA 20 3664 0222 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Will . Cotthorpe augent up.co. Jk	Telephone numbers Country code: National number: DZ07 S37 Z663 Country code: Mobile number (optional): T713 644387 Country code: Fax number (optional): Email address (optional): Country code: Fax number (optional):
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: Contact name: DUNCAN PADBOURNE Email address: A Valbourne C bau.	Agent Applicant Other (if different from the agent/applicant's details) Telephone number: