Application for listed building consent for alterations, extension or demolition of a listed building. 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.

First name:

1. Applicant Name and Address

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

Title:

2. Agent Name and Address

First name:

Last Hairie.	WHE SEL	Last name:
Company (optional):	LONDON SOROLAN CANDLE	Company (optional):
Unit:	House House suffix:	Unit: House House suffix:
House name:	MOINES & DEPOT	House name:
Address 1:	MOLMES 85	Address 1:
Address 2:	London	Address 2:
Address 3:	¥*	Address 3:
Town:		Town:
County:		County:
Country:		Country:
Postcode:	NW53AP	Postcode:
TO 75 CAMO BE WHA	PRECENTS HAVE ATTACHED ATTACHED ATTACHED ATTACHED ATTACHED	GATE TO
1.1010	2 7100,00	SDurer; 2013-02-27 #5 Shavisian: 4883 5
		Suince, 2013-94-27 #3 Sheetsens, 4003.3

	continue	ed)	4. Site Address Details
			Please provide the full postal address of the application site.
Has the work already	Yes	No No	Unit: House number: 75 House suffix:
started without consent?		Ф	House name:
If Yes, please state when the work was started (DD/MM/YYYY):			Address 1: FITZJOMNS AVE
			Address 2: London
			Address 3:
date must be pre-application submission)			Town:
Has the work been			County:
completed without consent?	Yes	No	Postcode (optional): NW3 6P
If Yes, please state the date when the			Description of location or a grid reference. (must be completed if postcode is not known):
work was completed (DD/MM/YYYY):			Easting: Northing:
			Description:
(date must be pre-application submission)			
		Reference	you were given. (This will help the authority to deal with this
Description		Reference number	you were given. (This will help the authority to deal with this application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name:
Description			application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible:
Description			application more efficiently). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission)
Description			application more efficiently). Please tick fit the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY):
7. Neighbour and Community Col		number	application more efficiently. Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received? 8. Authority Employee / Member With respect to the Authority, Jam: Do any of these
7. Neighbour and Community Co. Have you consulted your neighbours or the local community about the proposal? If Yes, please provide details:	nsultatio	number	application more efficiently). Please tick fit the full contact details are not known, and then complete as much as possible: Officer name: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received? 8. Authority Employee / Member With respect to the Authority, Iam: (a) a member of staff (b) an elected member (c) related to a member of staff
7. Neighbour and Community Collabe you consulted your neighbours or the local community about the proposal?		number	application more efficiently, Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received? 8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to a needed member (f) Yes, please growide details of the name, relationship and role
7. Neighbour and Community Co Have you consulted your neighbours or the local community about the proposal?		number	application more efficiently). Please tick the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY); (must be pre-application submission) Details of pre-application advice received? 8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member

rease provide a descri	ption of existing and proposed materials and Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls				
Roof covering				
Chimney				
Windows				
External doors	RENEW SOFTWOOD SIDE GATE BACK GLOSS	RENEW LIKE		
Ceilings				
Internal walls				
Floors				
Internal doors				
Rainwater goods				
Boundary treatments (e.g. fences, walls)				
Vehicle access and hard standing				
Lighting				
Others (add description)				
	 ditional information on submitted drawings on n(s)/drawing(s) references:	plans? Yes No		-
PHOTOS (

9. Materials

10. Demolition			11. Listed Building Alterations		
Does the proposal include the partial or total demolition of a listed building?	Yes	No	Do the proposed works include alterations to a listed building?	Yes	No
If Yes, which of the following does the propos	al involve?		If Yes, do the proposed works include:		
a) Total demolition of the listed building:	Yes	☐ No	(you must answer each of the questions)		
b) Demolition of a building within the curtilage of the listed building:	Yes	□No	a) Works to the interior of the building?	Yes	☐ No
c) Demolition of a part of the listed building:	Yes	☐ No	b) Works to the exterior of the building?	Yes	☐ No
If the answer to c) is Yes:			c) Works to any structure or object fixed		
i) What is the total volume of the listed building?(cubic metres)			to the property (or buildings within its curtilage) internally or externally?	Yes	☐ No
ii) What is the volume of the part to be demolished?(cubic metres)			d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?	Yes	☐ No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YY' (date must be pre-application submission) Please provide a brief description of the br			If the answer to any of these questions is Ye plans, drawings, photographs sufficient to i extent and character of the items to be rem	dentify the l oved, and t	location, he
Why is it necessary to demolish or extend (as of the building(s) and or structure(s)?	applicable)	all or part			
12. Listed Building Grading			13. Immunity From Listing		=
Please state the grading (if known) of the buil Buildings of Special Architectural or Historic i one box must be ticked)			Has a Certificate of Immunity from Listing be this building?	een sought Don't kn	
Grade I Eccle	siastical Gra	ide!	If Yes, please provide the result of the appli	cation:	
Grade II* Ecclesi	astical Grad	le II*			
Grade II Eccle	siastical Gra	de II			
	Don't ki	now 🛮			

14. Ownership Certificates One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates. ***Towner* is a person with a freehold interest or leasehold interest with at least 7 years left to run. Or signed - Applicant: Date DD/MM/YYYY):

* "owner" is a person with a freehold inter	est or leasehold interest with at least 7 yea	rs left to run.	
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):
			30/06/14
Regulation 6 of t I certify/ The applicant certifes that I h 21 days before the date of this appli " "owner" is a person with a freehold inter	cation, was the owner' of any part of	nservation Areas) Re e notice to everyone of the land or building	else (as listed below) who, on the da
Name of Owner	Addre	ess	Date Notice Served
CAMBON - BEPAIRS	nother B DER	OT. NW	53AP
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):
part of it, but I have/ the applic "owner" is a person with a freehold inter The steps taken were:	taken to find out the names and addres ant has been unable to do so. est or leasehold interest with at least 7 yea	us left to run.	
Name of Owner	Addre	ess	Date Notice Served
Notice of the application has been pub		On the following than 21 days b	ng date (which must not be earlier efore the date of the application):
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):

14. Ownership Certificates (continued)	TE OF O	NEDELLID CENT	EICATE D			
Regulation 6 of the Planning (Li certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find or date of this application, was the owner* of any unable to do so. ""owner" is a person with a freehold interest or leasehold it The steps taken were:	isted Building on ut the names part of the la	s and addresses o and to which this	f everyone else application re	who, on the day	21 days b	efore the nt has bee
Notice of the application has been published in the foll (circulating in the area where the land is situated):	owing news	spaper	On the follo than 21 days	wing date (which before the date	must not b of the appl	e earlier ication):
Signed - Applicant:	Orsigne	d - Agent:			Date DD/I	MM/YYYY):
15. Planning Application Requirements - Cl Please read the following checklist to make sure you ha information required will result in your application bein	ve sent all th					
the Local Planning Authority has been submitted. The original and 3 copies of a completed and dated application form:		information ned The original and	essary to desc d 3 copies of th	ther plans and dr ribe the subject o e completed dat	of the appli ed	cation:
The original and 3 copies of a plan which identifies the land to which the application relates and drawn to an identified scale and showing the direction of North:		The original and	d 3 copies of a	or D - as applica design and acces juidance notes fo	s statemen	t, _
16. Declaration I/we hereby apply for planning permission/consent as a information. I/we confirm that, to the best of my/our kn genuine opinions of the person(s) giving them.	lescribed in owledge, ar	this form and the ny facts stated are	accompanyin true and accu	g plans/drawings rate and any opir	and additi	onal are the
	ned - Agent			Date (DD/MM/Y	(date	e cannot b
17. Applicant Contact Details		18. Agent	Contact De	tails		
17. Applicant Contact Details Telephone numbers		18. Agent Telephone no		tails		
	Extension number:	100000000000000000000000000000000000000	umbers			Extension number:
Telephone numbers		Telephone nu	umbers ≌ National n			
Telephone numbers		Telephone no	National n	umber:		
Telephone numbers Country code: National number: Country code: Fax number (optional): Email address (optional):	number:	Country code Country code	Mobile nu	umber: mber (optional):		
Telephone numbers Country code: National number Country code: Fax number (optional):	number:	Country code Country code Country code	Mobile nu	umber: mber (optional):		
Telephone numbers Country code: National number: Country code: Fax number (optional): Email address (optional): DAJE: WARREN CATION GO	number:	Country code Country code Country code Country code Email addres	Mobile nu 2: Mobile nu 2: Fax numb 3: S (optional):	umber: mber (optional): er (optional):		
Telephone numbers Country code: National number: Country code: Fax number (optional): Email address (optional): DAJE: WARREN CATASAN (if the planning authority needs to make an appointmen out a site visit, whom should they contact? (Please select	number:	Country code Country code Country code Country code Email addres	Mobile nu E: Fax numb s (optional): Yes	umber: mber (optional): er (optional):	er (if differe	number:
Telephone numbers Country code: National number Country code: Fax number (optional): Email address (optional): DAVE - WAR DETAY OF APPLIED CAPTURE SET (1997) 19. Site Visit Can the site be seen from a public road, public footpath (if the planning authority needs to make an appointmen	number:	Country code Country code Country code Email addres	mbers R. National n Mobile nu Fax numb S (optional):	umber: mber (optional): er (optional):	er (if differe	number:
Telephone numbers Country code: National number: Country code: Fax number (optional): Email address (optional): DAVE: NO BETTY OF CATASTY (Please select if Other has been selected, please provide: To the rist en selected, please provide:	number:	Telephone nu Country code Country code Country code Email addres or other public lai	mbers R. National n Mobile nu Fax numb S (optional):	umber: mber (optional): er (optional):	er (if differe	number:



London Borough of Camden

COUNCIL OWN DEVELOPMENT PLANNING APPLICATION

Town & Country Planning General Regulations 1992

1. APPLICATION ADDRESS	75 FITZJOHNS AVE. LONDON NW3 6PD.
2. BRIEF DESCRIPTION OF DEVELOPMENT	TO RENEW SIDE CLATE.
3a. COMMITTEE AUTHORISING THE APPLICATION	For the purposes of Town & Country Planning General Regulations 1992 and as required by Appendix 2 (O), 12, of the Council's Standing Orders, the Committee on the (Date) resolved to seek planning permission to carry out the above development.
3b. CHIEF OFFICER AUTHORISING THE APPLICATION UNDER DELEGATED AUTHORITY	For the purposes of Town & Country Planning General Regulations 1992 and under powers delegated to me under Appendix 2 (O), 12, of the Council's Standing Orders, herby authorise the submission of the above planning application. Signed

4. IN WHICH COMMITTEE IS THE SITE VESTED		
5. MANAGING SERVICE/DEPARTMENT		
6. WHO WILL IMPLEMENT THE PLANNING PERMISSION	THE COUNCIL (reg 3)	PRIVATE PARTY (reg 4
7. FEE ATTACHED		
8. CONTACT OFFICER TO DISCUSS THE PROPOSAL		
9. IS THE APPLICATION ACCOMPANIED BY ANY ASSOCIATED APPLICATION(S)		
FOR DC USE		
Date Received		
Date Registered	Reg. N	0.



Works Order Ticket

London Borough of Camden Works Order number: 1593973/1

Contractor reference: BII973

Address: Flat 1, 75 Fitzjohn's Avenue, London, NW3 6PD

Occupant's details : Tenancy:MRS E JENKINSON (02074353678)

Reported by : Mrs Jenkinson (02074353678)
Raised : 14-NOV-2013 14:53 - CAMPB700

Description: tnt called to rep[ort the wooden gate on thge corner of Arkwright Rd gets stuck and the

caller unable to lift gate to exit the property.

Programme RI

Void Ref

Saved notes

03/06/2014 10:29:50 - (CAMMV700) I CALLED DHANJI BUT NOT ABLE TO GET THROUGH. PARNJIT WILL TRAY AGAIN LATER.

05/03/2014 13:44:03 - (CAMPA701) Minya can you find out what has happened on this job since the measure up? is there joinery to be order or can an appt be booked if so how long - thanks

25/11/2013 14:00:52 - (CAMDL700) new apt booked for carpenter - Charlie - 11/12/13 - 9:30 - 11:00, this was confirmed with the tenant

25/11/2013 13:59:35 - (CAMTS700) This job has been handed back to TL as it has been placed in the plumbing diary for John Johnson who is a multi trader (plumber) not carpenter.

14/11/2013 14:53:26 - Location : Arwright Rd Front Garden Gate appt between 4-5pm

14/11/2013 14:53:25 - Appointment: 25/11/2013 16:00

Assets

Type Asset Value

Asbestos Asbestos :Hallway (Presence):Presumed (Risk): Very Low (Detail): Materials

in/out Electric/Gas box & Fuse pads

Admin Unit Communal
Characteristics Entrance Lock 1 FOB

Boiler is showing as Active. Make & Model is a Vaillant

Apex Assets Gas Boiler Turbomax Plus 824E. Under contract with BTU Maintenance.

The statutory service was on Jun 8 2011 12:00AM and the last

service type was Annual Inspection

Leaseholder Parent Block S151 1,363.62
Thresholds Threshold:

Leaseholder Parent Estate S151 1,363.62

Thresholds Threshold:

Property
Characteristics
Bedrooms 2

Property
Characteristics
Max Floors in Block 3

Characteristics

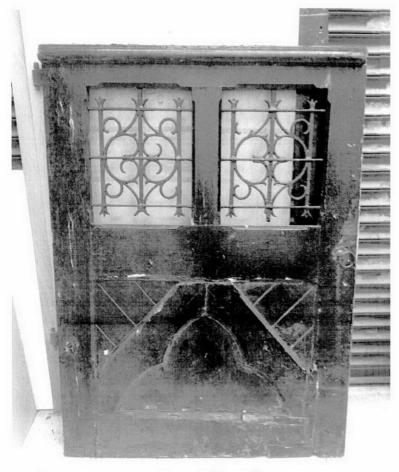
Repairs Bathroom

Repairs Assets - Bath (qty:1, Expiry: 01- (Start:01-JAN-1986) JAN-2006)

Repairs Bathroom



REAR VIEWED FROM PROPRETY.



STREET VIEW. FRONT