

Planning Services Camden Town Hall Arayle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk. For office use Telephone

Fax

: 020 7974 1911 : 020 7974 5713 Date Payse. App. No.

Fee

Application for removal or variation of a condition following grant of planning permission.

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. Applican	t Name and Address	2. Agent Name and Address
Title:	First name:	Title: MR First name: ROBERT
Last name:		Last name: BOCHEL
Company (optional):		Company SQUIRE AND PARTNERS
Unit:	House House number: suffix:	Unit: House House number: suffix:
House name:		House name:
Address 1:		Address 1: 77 WICKLOW STREET
Address 2:	* 11-0/1-1-1-1	Address 2:
Address 3:		Address 3:
Town:		Town: LONDON
County:		County:
Country:		Country:
Postcode:		Postcode: WCIX 9 J7

3. Site Address Details Please provide the full postal address of the application site. Unit: House number: 4-9 House suffice:	Has assistance or prior advice been sought from the local authority about this application?			
House name: Address 1: ST &D MUNDS TEKRACE Address 2:	If Yes, please complete the following information about the advice 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:			
Address 3:	MS MICHELLE HORN			
Town: LOHOON	Reference:			
County:	CAMPEN ACCESS & SERVICE PAVE OF MOM OFFICER			
Postcode (optional): NW 8 7 Q U Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYY): (must be pre-application submission) Details of pre-application advice received?			
Easting: 527624 Northing: 183660 Description:	A MEETING WAS HELD TO RUN THROUGH PROPOSALS			
Reference number: 2011 5977 P Date of decision (Please state the condition number(s) to which this application related to the condition of the subjections of the subjection of the subj	DD/MM/YYYY): 6 1.10 · 20[2] (date must be pre-application submission) es: 6. 7.			
3.	8.			
4.	9.			
5.	10.			
Has the development already started? If Yes, please state when the development started (DD/MM/YYYY): Has the development been completed? If Yes, please state when the development was completed (DD/MM)				
Trey preservate mierrate development has completed to similar	submission)			
6. Condition(s) - Removal				
Please state why you wish the condition(s) to be removed or chang This application is for a variation listed in Amers 4 of the inspector's for relocation of the wheelchaut	ed: to the list of approved drawings decision; this is in order to ablow units as set out inthe submission.			
If you wish the existing condition to be changed, please state how	you wish the condition to be varied:			
The wording of condition 16 in Mr. remain that same. The list of ara as noted on the accompanying (mas in Money 4 would be varied;			
The second of th	1 Dave 2012-20-17 45 SRevision 4536 5			

7. Ownership Certificates

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

I certify/The applicant certifies that on the owner (owner is a person with a freehold into which the application relates.	day 21 days before the date of this application nobody exercise or leasehold interest with at least 7 years left to run) of a	cept myself/ the applicant was the my part of the land or building to
Signed - Applicant:		Date DD/MM/YYYY;
		10.04.2014
I certify/ The applicant certifies that I have	CERTIFICATE OF OWNERSHIP - CERTIFICATE B elopment Management Procedure) (England) Order 20 1/the applicant has given the requisite notice to everyone was the owner (owner is a person with a freehold interest of g to which this application relates.	else (as listed below) who, on the day
Name of Owner	Address	Date Notice Served
Signed Applicant:	Or signed - Agent:	Date DD/MM/YYYY:
been unable to do so. The steps taken were:	least 7 years left to run) of the land or building, or of a part	orr, partition of opportunities
Name of Owner	Address	Date Notice Served
	NIO. 80 - 400 - 1000 -	
Notice of the application has been publish (circulating in the area where the land is si		ing date (which must not be earlier perfore the date of the application):
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY:

Certify/ The applicant certifies that: Certificate A cannot be issued for the Alf reasonable steps have been take date of this application, was the own.	CERTIFICATE OF OWNERSHIP - CE lopment Management Procedure) (I his application on to Find out the names and addresse	England) Order 2010 Certificate under Article 12 as of everyone else who, on the day 21 days before the interest or leasehold interest with at least 7 years left to run?
Notice of the application has been published (circulating in the area where the land is situ	d in the following newspaper uated):	On the following date (which must not be earlier than 21 days before the date of the application):
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY:
terne il como con estable e en escala en entre		The second secon
Town and Country Planning (Develo Agricultur (A) None of the land to which the applicatio Signed - Applicant:	al Land Declaration - You Must Comp	ngland) Order 2010 Certificate under Article 12 lete Either A or B
(B) I have/ The applicant has given the requi before the date of this application, was a ter as listed below:	isite notice to every person other than nant of an agricultural holding on all o	n myself/ the applicant who, on the day 21 days or part of the land to which this application relates,
Name of Tenant	Addres	5 Date Notice Served
3		
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
information required will result in your appli the Local Planning Authority has been subm The original and 3 copies of a completed and dated application form: The original and 3 copies of other plans and information necessary to describe the subject	rure you have sent all the information cation being deerned invalid. It will nitted. 9 (UNIVALINA) The origon or a comment of the origon of the original of the original or the origin	in support of your proposal. Failure to submit all lot be considered valid until all information required by inal and 3 copies of the completed, dated applicatificate (A, B, C, or D - as applicable):

information. I/w	ion bly for planning permission/consen e confirm that, to the best of my/o ns of the person(s) giving them.	it as described in tl ur knowledge, any	nis form and the ac r facts stated are tr	ccompanying ue and accura	plans/drawings and te and any opinion	l additional s given are the	
Signed - Applicant:		Date (DD/MM/YYYY):					
					10.04.2014	(date cannot be pre-application)	
11. Applicar	nt Contact Details		12. Agent C	ontact Deta	ails		
Telephone num	bers		Telephone num	bers			
Country coce: National number:		Extension number:	Country code:	National nu	mber:	Extension number:	
				020 72	18 2222		
Country code:	Mobile number (optional):	7	Country code:	Mobile number (optional): Fax number (optional):			
Country code:	Fax number (optional):	_	Country code:				
Email address (optional):			Email address (optional):				
			rb@ sa	quire an	d partners.	com	
13. Site Visit							
Can the site be s	een from a public road, public foo	tpath, bridleway o	r other public land	? Yes	No		
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)			Agent	Applic		different from the	
	n selected, please provide:					· · · · · · · · · · · · · · · · · · ·	
Contact name:			Telephone num	iber:			

Email address: