## 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.

i. Appli	cant Name and Address	2. Agent Name and Address			
Title:	First name:	Title:	MR	First name:	RICHARD
Last name:		Last name:	PART	RIDGE	
Company (optional):	MARIA MONTESSORI TRAINING ORG.	Company (optional):			
Unit:	House number: 26 . House suffix:	Unit:		House number:	House suffix:
House name:		House name:			
Address 1:		Address 1:	GRA	NVILLE	PARK
Address 2:		Address 2:			
Address 3:		Address 3:		-	
Town:		Town:			-
County:	LOHDON	County:	LOND	an)	
Country:	UK	Country:	UK		The state of the s
Postcode:	NW3 5NW.	Postcode:	SE13	7DW.	The second secon

3. Site A	ddress Details	4. Pre-application Advice			
Please prov	ride the full postal address of the application site.	Has assistance or prior advice been sought from the local			
Unit:	House number: 26. House suffix:	authority about this application? ✓ Yes N			
House name:		If Yes, please complete the following information about the advi			
Address 1:	LYNDHURST GARDONS	you were given. (This will help the authority to deal with this application more efficiently).			
Address 2:		Please tick if the full contact details are not known, and then complete as much as possible:			
Address 3:		Officer name:			
Town:		ALAN WITO (SEVIOR PLANDER CONSIGNATION			
County:		Reference:			
Postcode (optional):	NW3 SNW.	Date (DD/MM/VVV)			
Description	of location or a grid reference. Impleted if postcode is not known):	(must be pre-application submission) 28/68/201			
Easting:	Northing:	Details of pre-application advice received?  1 SENT YHE PHOTO TO AVAN AND			
Description		HE AGREED THAT IT LOOKS LIKE A			
		VERY GOOD MATCH"			
		1000 1000			
i. Descrir	otion Of Your Proposal				
REPLAC	EMBUT OF BXISTING COACH H	OUSE EXTENSION WITH NEW SINGLE			
STOKET	EXTENSION FOR EXECUTIONAL	FACILITY (CLASS DI)			
Reference nu					
	the condition number(s) to which this application relate	22/08/2013 (Date must be pre-application submission) (DD/MM/YYYY)			
	. SANGLES OF MATERIALS.	6.			
2.	/	7.			
3.	· · · · · · · · · · · · · · · · · · ·	8.			
4.		9.			
5.		10.			
as the deve	lopment already started?	Yes No			
Yes, please	state when the development started (DD/MM/YYYY):	21 107/200 (date must be pre-application			
as the deve	lopment been completed?	Yes No			
Yes, please	state when the development was completed (DD/MM/	Sufficiently			
Discharc	ge Of Condition				
ease provid	e a full description and/or list of the materials/details th	at are being submitted for approval:			
KECLAN	MED BRICK (TRAVIS PERKINS TOF. 3	3378) TO MATON GUETAT COPNEL 1841			
PHOTO O	OF BRICK AGAINST EXISTING WAL	L IS ATTACHED.			
Part Disc	harge Of Condition(s)				
e you seeking to discharge only part of a condition?  (es please indicate which part of the condition?  Yes No					
-ACIALC	BRICKS Afflowat of Sample .	ates to:			
7174	-MY MIREVAL, OF SAMPLE.				

8. Planning Application Requirements - Checklist						
Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.						
The original and 3 copies of a completed and dated application form:	as List. and	The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:				
The correct fee: Non.	anal.	PHOSO ATTACHES to enem!				
9. Declaration  /we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional nformation. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed - Accord  Date (DD/MM/YYYY):  (date cannot be pre-application)						
10. Applicant Contact Details		11. Agent Contact Details				
Telephone numbers		Telephone numbers				
Country code:  National number:  Country code:  Mobile number (optional):  Fax number (optional):	Extension number:	1 1				
Email address (optional):		Email address (optional):				
		10173@btintenet.com.				
12. Site Visit						
Can the site be seen from a public road, public f f the planning authority needs to make an appo out a site visit, whom should they contact? ( <i>Plea</i> f Other has been selected, please provide:	nintment to carry	or other public land? Yes No  Agent Applicant Other (if different from the agent/applicant's details)				
Contact name:		Telephone number:				
MRS. CHERRY WORTHWATOW.		020 7435 3646.				

Email address: