

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

Telephone

: 020 7974 1911 : 020 7974 5713

For office use

Date Payee

App. No.

Fee

Application for Planning Permission. Town and Country Planning 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. Applic | ant Name and Address | 2. Agent | Name and Address |
|---|---|------------------------|---|
| Title: | First name: | Title: | First name: ELIZABETH |
| Last name: | PALCOLEX TRUST MANAGEMENT AG | Last name: | TORNKVIST |
| Company (optional): | | Company (optional): | PHILIP WALNER ARCHITECTS |
| Unit: | House number: House suffix: | Unit: | House suffix: |
| House name: | | House name: | |
| Address 1: | KASPAR-FENNER-STRASS 6 | Address 1: | LADBROKE ROAD |
| Address 2: | CH - 8700 KUESNACHT | Address 2: | |
| Address 3: | | Address 3: | |
| Town: | | Town: | LONDON |
| County: | | County: | |
| Country: | | Country: | |
| Postcode: | | Postcode: | WII 3PA |
| 3. Descri | ption of the Proposal | | |
| Please des | cribe the proposed development, including any change o | of use: | |
| | | | |
| | EMOMITION OF EXISTING HOD | | |
| $ $ τ | HE BUILDING OF A NEW 3 S | TOREY | SEMI-DETACHED HOUSE. |
| | | | • |
| | | | |
| | | | |
| Research Second Assessed | lding, work or change of use already started? | Yes | V No |
| | se state the date when building, e were started (DD/MM/YYYY): | | (date must be pre-application submission) |
| 430 000 00 100 100 000 00 000 000 000 000 | ding, work or change of use been completed? | Yes | No |
| | se state the date when the building, work of use was completed: (DD/MM/YYYY): | | (date must be pre-application submission) |
| | | | \$Date:: 2010-09-10 #\$ \$Revision: 2999 \$ |

| 4. Site Address Details | 5. 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 number: 14 House suffix: | authority about this application? |
| House name: | If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this |
| Address 1: WELL ROAD | 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: LONDON | |
| County: | Reference: |
| Postcode (optional): NW3 12H | |
| Description of location or a grid reference. (must be completed if postcode is not known): | Date (DD/MM/YYYY): (must be pre-application submission) |
| Easting: Northing: | Details of pre-application advice received? |
| Description: | |
| | |
| | |
| | |
| 6. Pedestrian and Vehicle Access, Roads and Rights of Way | 7. Waste Storage and Collection |
| Is a new or altered vehicle access proposed | Do the plans incorporate areas to store |
| to or from the public highway? Is a new or altered pedestrian | and aid the collection of waste? Yes No |
| access proposed to or from | If Yes, please provide details: |
| the public highway? Yes No Are there any new public roads to be | RUBBISH WILL BE COLLECTED |
| provided within the site? | AND STORED IN A RUBBISH BIN JUST INSIDE THE SIDE PASSAGE |
| Are there any new public | READY FOR COLLECTION. |
| rights of way to be provided within or adjacent to the site? Yes Ves | |
| Do the proposals require any diversions /extinguishments and/or | Have arrangements been made |
| creation of rights of way? | for the separate storage and collection of recyclable waste? Yes No |
| If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan | If Yes, please provide details: |
| (s)/drawings(s) | RECYCLING BINS WILL BE KEPT |
| | IN A COPBOARD IN THE GARAGE |
| | TO BE BROUGHT OUT ON |
| | RECYCLING COXLECTION DAY. |
| | |
| 8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member | Do any of these statements apply to you? Yes No |
| (c) related to a member of staff (d) related to an elected membe | er |
| If Yes, please provide details of the name, relationship and role | |
| | |
| | |

| 9. Materials If applicable, please stat | te what mat | terials are to be used externa | ally. Include | e type, colour and name for ea | ach material: | | |
|--|------------------------|--|---------------|--|---------------|---|---------------|
| | Existing (where app | | | Proposed | | | Don't Know |
| Walls | ORA | NAE BRICK | | PAINTED RE | | | |
| Roof | CEM | IENT TILE | | PAINTED ME | ETAL | | |
| Windows | PAII | NTED TIMBER | , | PAINTED ME | ETAL | | |
| Doors | PAIN | ITED TIMBER | | PAINTED ME | ETAL | | |
| Boundary treatments (e.g. fences, walls) | BRIC | CK + TRELLIS | | BRICK + TR | ELLIS | | |
| Vehicle access and hard-standing | | | | | | | |
| Lighting | | | | | | V | |
| Others (please specify) | | ORANGE STAINED PAINTED METAL TIMBER GARAGE DOOR GARAGE DOOR | | | | | |
| | | | - | s)/design and access stateme | ent? Yes | | No |
| If Yes, please state references for the plan(s)/drawing(s)/design and access statement: DRAWINGS 639 / 01 - 08 , 50 - 59 DESIGN AND ACCESS STATEMENT | | | | | | | |
| 10. Vehicle Parkin | ig | | | | | | |
| | I | the existing and proposed n | | | T | | |
| Type of Vehic | :le | Total Existing | TOta | tal proposed (including pifferen spaces retained) in space | | | |
| Cars | | 1 | | 1 | 0 | | |
| Light goods vehi public carrier veh | icles/ hicles | 0 | | 0 | 0 | | |
| Motorcycles | S | 0 | | 0 | 0 | | |
| Disability spaces NA NA | | | | | NA | | |

2

NA

NA

0

NA

NA

Cycle spaces

Other (e.g. Bus)

Other (e.g. Bus)

NA

2

NA

| (11 Foul Cowage | (12. Assessment of Flood Bisk |
|--|---|
| 11. Foul Sewage | 12. Assessment of Flood Risk |
| Please state how foul sewage is to be disposed of: | Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and |
| Mains sewer Cess pit | consult Environment Agency standing advice and your local planning authority requirements for information as necessary.) |
| Septic tank Other | ☐ Yes No |
| Package treatment plant | If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site. |
| Are you proposing to connect to the existing drainage system? Yes No | Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No |
| If Yes, please include the details of the existing system on the application drawings and state references for the | Will the proposal increase the flood risk elsewhere? Yes No |
| plan(s)/drawing(s): | How will surface water be disposed of? |
| | Sustainable drainage system Existing watercourse |
| | Soakaway Pond/lake |
| | ✓ Main sewer |
| 13. Biodiversity and Geological Conservation | 14. Existing Use |
| | Please describe the current use of the site: |
| To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether | SINALE FAMILY HOME |
| they are likely to be affected by your proposals. | |
| Having referred to the guidance notes, is there a reasonable likelihood of the following being affected adversely or conserved | Is the site currently vacant? |
| and enhanced within the application site, or on land adjacent to | If Yes, please describe the last use of the site: |
| or near the application site? | |
| a) Protected and priority species: | SINALE FAMILY HOME |
| Yes, on the development site | |
| Yes, on land adjacent to or near the proposed development No | When did this use end (if known)? |
| b) Designated sites, important habitats or other biodiversity | (date where known may be approximate) 30/08/7013 |
| features: | Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination |
| Yes, on the development site Yes, on land adjacent to or near the proposed development | assessment with your application. |
| No | Land which is known to be contaminated? Yes No |
| c) Features of geological conservation importance: | Land where contamination is suspected for all or part of the site? Yes No |
| Yes, on the development site | A proposed use that would |
| Yes, on land adjacent to or near the proposed development | be particularly vulnerable to the presence of contamination? |
| ₩ No | |
| 15. Trees and Hedges | 16. Trade Effluent |
| Are there trees or hedges on the proposed development site? Yes No | Does the proposal involve the need to dispose of trade effluents or waste? Yes No |
| And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the | If Yes, please describe the nature, volume and means of disposal |
| development or might be important as part of the local landscape character? | of trade effluents or waste |
| If Yes to either or both of the above, you may need to provide a full | |
| Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning | |
| submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to | |
| a contain in accordance with the current 'UCLU' I. Ireac in relation to | |

| 17. Residential Units (Including Conversion) Does your proposal include the gain, loss or change of use of residential units? Yes No If Yes, please complete details of the changes in the tables below: | | | | | | | | | | | | | | | |
|--|--------------|--------|----------|---------|----------|-----------------|----------|------------------------------|--------------|-------|----------|---------|---|-----------------|----------|
| Proposed Housing | | | | | | Existi | ng F | lous | ing | | | | | | |
| Market Housing | Not known | 1 | Numb | per of | | ooms Unknown | Total | Market Housing | Not known | 1 | Numb | er of | | ooms Unknown | Total |
| Houses | | | | | | | et. | Houses | | | | | | | a |
| Flats and maisonettes | | | | | | | b | Flats and maisonettes | | | | | | | <u>b</u> |
| Live-work units | | | | | | | C. | Live-work units | | | | | | | Ę |
| Cluster flats | | | | | | | ij | Cluster flats | | | | | | | d |
| Sheltered housing | | | | | | | e | Sheltered housing | | | | | | | 130 |
| Bedsit/studios | | | | | | | Ī | Bedsit/studios | | | | | | | Ē |
| Unknown type | | | | | | | 0 | Unknown type | | | | | | | Q. |
| | To | otals | (a + b | + C + | d + e | + f + g) = | A | 31 | To | otals | (a + b | + C + | d + e | + f + g) = | E |
| | | | | | | | | | · | | | | | 37 | |
| Social Rented | Not | | Numb | | | | Total | Social Rented | Not | | Numb | | | | Total |
| Houses | known | 1 | 2 | 3 | 4+ | Unknown | | Houses | known | 1 | 2 | 3 | 4+ | Unknown | |
| Houses | | | | | | | <i>d</i> | Houses Flats and maisonettes | | | | | | | 67 |
| Flats and maisonettes | | | | | | | D | | | | | | | | Di. |
| Live-work units | | | | | | | G | Live-work units | | | | | | | 6 |
| Cluster flats | | | | | | | Çi | Cluster flats | | | | | | | L)- |
| Sheltered housing | | | | | | | - 0 | Sheltered housing | | | | | | | 6 |
| Bedsit/studios | | | | | | | 1. | Bedsit/studios | | | | | | | f |
| Unknown type | | | <u> </u> | | | | 9 | Unknown type | | | <u> </u> | | | | ÿ |
| | T | otals | (a + b | + C + | d + e | + f + g) = | =0 | | To | otals | (a+b) |) + C + | d + e | + f + g) = | |
| | Not | | Numl | ner of | Rodr | ooms | Total | | Not | | Numb | oer of | Rodr | noms | Total |
| Intermediate | known | 1 | 2 | 3 | 4+ | Unknown | | Intermediate | known | 1 | 2 | 3 | 4+ | Unknown | |
| Houses | | | | | | | a | Houses | | | | | | | 22 |
| Flats and maisonettes | | | | | | | 0 | Flats and maisonettes | | | | | | | 17 |
| Live-work units | | | | | | | | Live-work units | | | | | | | |
| Cluster flats | | | | | | | 1 | Cluster flats | | | | | | | 22 |
| Sheltered housing | | | | | | | É | Sheltered housing | | | | | | | 9 |
| Bedsit/studios | | | | | 1700 | | 7 | Bedsit/studios | | | | | | | 7. |
| Unknown type | | | | | | | gr. | Unknown type | | | | | | | IJ |
| allumidestinidescommunication (IIII) periodida espeties en | Т | otals | (a + t |) + C + | d + e | + f + g) = | G. | | T | otals | (a + t |) + C + | d + e | + f + g) = | 74 |
| | | | | | | | | | | | | | | | |
| Key worker | Not | 1 | Numl | T | | | Total | Key worker | Not | 1 | | | | ooms | Total |
| Houses | known | 1 | 2 | 3 | 4+ | Unknown | | Houses | known | 1 | 2 | 3 | 4+ | Unknown | 1 |
| Flats and maisonettes | | | - | | | | 1-1 | Flats and maisonettes | | | - | | | | 1 |
| Live-work units | | | | | | | | Live-work units | | | - | | | | |
| | | | - | | | | | | | | 1 | | | | |
| Cluster flats | | | | | | | (4) | Cluster flats | | | - | | | | 1,1 |
| Sheltered housing | | | | | | | TI. | Sheltered housing | | | - | | | | |
| Bedsit/studios | | | - | | | | | Bedsit/studios | | | | | | | |
| Unknown type | | | (5) | | <u> </u> | | | Unknown type | | | 15 | | <u>ــــــــــــــــــــــــــــــــــــ</u> | | 8 |
| | 1 | otals | (a + l |) + C + | a + e | + f + g) = | | | 11 | otals | (a + L |) + C + | a + e | + f + g) = | |
| Total proposed | residen | tial u | ınits | (A + | B + C | + D) = | | Total existing | resider | ntial | units | (E - | + F + (| G + H) = | |

TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):

| | 18. All Types of Development: Non-residential Floorspace Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No | | | | | | |
|--|--|------------------------------|------------------------------------|--|-------------------------------------|--|---|
| | u have answered Yes to t | | | | | | No |
| | se class/type of use | Not applicable | | Gross internal to be lost by use or den | floorspace change of nolition | Total gross internal floorspace proposed (including change of use)(square metres) | Net additional gross internal floorspace following development (square metres) |
| A1 | Shops | | | | | | |
| | Net tradable area: | | | | | | |
| A2 | Financial and professional services | | | | | | |
| A3 | Restaurants and cafes | | | | | | |
| A4 | Drinking establishments | | | | | | |
| A5 | Hot food takeaways | | | | | | |
| B1 (a) | Office (other than A2) | | | | | | |
| B1 (b) | Research and development | | | | | | |
| B1 (c) | Light industrial | | | | | | |
| B2 | General industrial | | | | | | |
| B8 | Storage or distribution | П | | | | | |
| C1 | Hotels and halls of residence | $\overline{\Box}$ | | | | | |
| C2 | Residential institutions | $\overline{\Box}$ | | | | | |
| D1 | Non-residential | $\overline{\Box}$ | | | | | |
| D2 | institutions Assembly and leisure | $\stackrel{\square}{\sqcap}$ | | | | | |
| OTHER | | | | | | | |
| Please | | | | | | | |
| Specify | Total | - | | | | | - |
| ln ad | | tiol inc | titutions and ho | etala places ad | ditionally in | dianta tha lace ar asia of | |
| Llee | Not | | | stels, please additionally inc ost by change Total room | | ns proposed (including | |
| class | applicable | | ing rooms to be I of use or dem | olition | ch | nanges of use) | Net additional rooms |
| C1 | Hotels Residential | | | | | | |
| | Institutions | | | | | | |
| OTHER Please | | | | | | | |
| Specify | | | | | | | |
| 19. Em | ployment | | | | | | |
| Please co | omplete the following in | forma | tion regarding er | nployees: | | | |
| | | | Full-time | Part | -time | | tal full-time guivalent |
| Exi | isting employees | NA | | | | | |
| Pro | posed employees | | | | | | |
| 20. Ho | urs of Opening | | | | | | |
| | Please state the hours of opening for each non-residential use proposed: | | | | | | |
| Use Monday to Friday Saturday Sunday and Bank Holidays Not known | | | | | | | |
| | NA | - | | | | bulktionagi | |
| | | | | | | | |
| | | | | | | | |
| 21. Site | e Area | | | | | | |
| Please st | ate the site area in hecta | res (ha | 0.03 | | | | |

| 20 Industrial or Commercial Dross | | | | | |
|---|-------------------|--|--|----------------------------------|---|
| 22. Industrial or Commercial Proce | sses | | | | |
| Please describe the activities and processes we be carried out on the site and the end production plant, ventilation or air conditioning. Please it type of machinery which may be installed or | cts ind includ | de the BATH | ILY HOME. PROOM EXTRI TING AND F | RESIDENT | DING OF A SINGLE TAL KITCHEN AND FIR CONDITIONING AS |
| Is the proposal a waste management develo | pmer | nt? Yes | No | | |
| If the answer is Yes, please complete the following | owinç | g table: | | | |
| | Not applicable | The total capace including engine allowance for c tonnes if solic | city of the void in o eering surcharge a cover or restoration d waste or litres if li | and making no on material (or | Maximum annual operational throughput in tonnes (or litres if liquid waste) |
| Inert landfill | | | | | |
| Non-hazardous landfill | | | | | |
| Hazardous landfill | | | | | |
| Energy from waste incineration | | | *************************************** | | |
| Other incineration | | | | | |
| Landfill gas generation plant | | | | | |
| Pyrolysis/gasification | | | | | |
| Metal recycling site | | | | | |
| Transfer stations | | | | | |
| Material recovery/recycling facilities (MRFs) | | | | | |
| Household civic amenity sites | | | | | |
| Open windrow composting | | | | | 1 |
| In-vessel composting | | | | | |
| Anaerobic digestion | | | | | |
| Any combined mechanical, biological and/ or thermal treatment (MBT) | | | | | |
| Sewage treatment (MBT) | | | | | |
| Other treatment | H | | | | |
| Recycling facilities construction, demolition | | *************************************** | | | |
| and excavation waste Storage of waste | H | | | | |
| Other waste management | 片 | | | | |
| Other developments | 屵 | | | | |
| Please provide the maximum annual operation | LL ional | throughout of the | o following waste | ctroams: | |
| Municipal | Uriui | throughput or and | Tollowing waste. | Streams. | |
| Construction, demolition and e | xcava | ation | | | |
| Commercial and industr | | | | | |
| Hazardous | - | | | | |
| If this is a landfill application you will need to planning authority should make clear what | o pro inforr | vide further inform mation it requires | nation before you on its website. | ır application can | be determined. Your waste |
| 23. Hazardous Substances | | | | | |
| Does the proposal involve the use or storage the following materials in the quantities stat | | | ☐ No | Not applicat | ble |
| If Yes, please provide the amount of each su | bstan | nce that is involved | d: | | |
| Acrylonitrile (tonnes) | | Ethylene oxide (tor | | | Phosgene (tonnes) |
| Ammonia (tonnes) | Hydr | rogen cyanide (tor | nnes) | Sul | phur dioxide (tonnes) |
| Bromine (tonnes) | | Liquid oxygen (tor | | | Flour (tonnes) |
| | q biuç | petroleum gas (tor | | Refined | d white sugar (tonnes) |
| Other: | | | Other: | | |
| Amount (tonnes): | | | Amount (toni | nes): | |

\$Date:: 2010-09-10 #\$ \$Revision: 2999 \$

| | *************************************** | | | | |
|--|--|--|--|---------------------------|--|
| 24. Ownership Certificates | | | | | |
| One Certificate A, B, C, or D, must b | | | | his application form | |
| Town and Country Planning (D | | E OF OWNERSHIP - CER | | under Article 12 | |
| Town and Country Planning (D I certify/The applicant certifies that on t | he day 21 days be | fore the date of this appli | ication nobody except myself/ th | e applicant was the | |
| owner (owner is a person with a freehold | interest or leasehol | ld interest with at least 7 ye | ears left to run) of any part of the | and or building to | |
| which the application relates. | | Oneigned Asset | | D-+- (DD /MM/////// | |
| Signed - Applicant: | | Or signed - Agent: | | Date (DD/MM/YYYY): | |
| | | 21 | 2 | 20/08/2014 | |
| | CEDTIFICATI | F OF OWNERSHIP OFFI | TIFICATED | | |
| Town and Country Planning (D I certify/ The applicant certifies that I h 21 days before the date of this applicati left to run) of any part of the land or buil | evelopment Mana ave/the applicant on, was the owne | has given the requisite n r (<i>owner is a person with a</i> | ngland) Order 2010 Certificate otice to everyone else (as listed | below) who, on the day | |
| Name of Owner | | Address | | Date Notice Served | |
| | | | | | |
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| | | | | | |
| Cinned Appliant | | 0 1 1 1 | | D 1 (DD (MM A () () () () | |
| Signed - Applicant: | | Or signed - Agent: | | Date (DD/MM/YYYY): | |
| | | | | | |
| | 05071510.47 | - OF OUTUEDOUID OFF | TIFIO A TE O | | |
| Town and Country Planning (D | | E OF OWNERSHIP - CER agement Procedure) (E) | | under Article 12 | |
| certify/ The applicant certifies that: | Company of the control of the contro | | , | | |
| Neither Certificate A or B can b All reasonable steps have been | taken to find out | the names and addresses | s of the other owners (owner is a | person with a freehold | |
| interest or leasehold interest wit | h at least 7 years lei | ft to run)of the land or bu | ilding, or of a part of it , but I hav | e/ the applicant has | |
| been unable to do so. The steps taken were: | | | | | |
| The steps taken were. | | William Committee of the Committee of th | | | |
| | | | | / | |
| | | | / | | |
| Name of Owner | | Address | | Date Notice Served | |
| | | | | h and a second | |
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| | | | | | |
| | / | | | | |
| Notice of the application has been pub | lished in the follow | wing newspaper | On the following date (which | must not be earlier | |
| (circulating in the area where the land | is situated). | | than 21 days before the date | or the application): | |
| | | | | | |
| Signed - Applicant: | | Or signed - Agent: | | Date (DD/MM/YYYY): | |
| | | J. J. | | | |
| • | | | | 11 | |

| 24. Ownership Certificates (cont | | | | | 1 | |
|---|--|------------------------------------|--|---|---------------|--|
| CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) of any part of the land to which this application relates, but I have/ the applicant has been unable to do so. | | | | | | |
| The steps taken were: | | | | | | |
| | | | | | | |
| Notice of the application has been public (circulating in the area where the land is | shed in the follow situated): | ving newspape | or On the following date (w than 21 days before the | hich must not be earlie date of the application) | er): | |
| | | | | | | |
| Signed - Applicant: | | Or signed - Ag | ment. | Date (DD/MM/YY | YY); | |
| oigned ripplicant. | | Or signou 7.5 | jont. | | | |
| | | | | | | |
| | | | | | | |
| 25. Agricultural Land Declaration | on | | | | $\overline{}$ | |
| Town and Country Planning (Deve Agricul | elopment Manag | gement Proce | DECLARATION dure) (England) Order 2010 Certifica st Complete Either A or B | te under Article 12 | | |
| (A) None of the land to which the applica | ation relates is, or | is part of, an a | gricultural holding. | | | |
| Signed - Applicant: | | Or signed - Ag | | Date (DD/MM/YY | YYY): | |
| | | 5 | 17 | 20/08/2014 | 1 | |
| (B) I have/ The applicant has given the rebefore the date of this application, was a as listed below: | equisite notice to a tenant of an agr | every person o icultural holdir | other than myself/ the applicant who, ong on all or part of the land to which thi | n the day 21 days | | |
| Name of Tenant | | | Address | Date Notice Serv | ed | |
| | | | | | | |
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| Signed - Applicant: | L | Or signed - Ag | gent: | Date (DD/MM/YY | /YY): | |
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| 26. Planning Application Requi | rements - Che | | | | | |
| Please read the following checklist to ma information required will result in your a the Local Planning Authority has been su | ake sure you have opplication being o | sent all the inf | formation in support of your proposal. d. It will not be considered valid until a | Failure to submit all Il information required | by | |
| The original and 3 copies of a completed | l and dated | ₩ (V | The correct fee: | | · · | |
| application form: The original and 3 copies of the plan whi | ich identifies | Ľ | The original and 3 copies of a design a | and access statement, | / | |
| the land to which the application relates identified scale and showing the directio | drawn to an | | if required (see help text and guidance The original and 3 copies of the comp | leted, dated | | |
| The original and 3 copies of other plans a information necessary to describe the su | and drawings or iblect of the appli | cation: | Ownership Certificate (A, B, C, or D - a The original and 3 copies of the comp | | V | |
| Article 12 Certificate (Agricultural Holdings): | | | | | | |

| 27. Declaration | | | | | | |
|--|---|--|--|--|--|--|
| I/we hereby apply for planning permission/consent as described in t | his form and the accompanying plans/drawings and additional | | | | | |
| Information. Signed - Applicant: Or signed - Agent: | Date (DD/MM/YYYY): | | | | | |
| Olymou Typhou | 20/08/2014 (date cannot be pre-application) | | | | | |
| 28. Applicant Contact Details | 29. Agent Contact Details | | | | | |
| Telephone numbers | Telephone numbers | | | | | |
| Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | Country code: National number: +44 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | | | | | |
| | etornkvist @philipwagner.co.uk | | | | | |
| 30. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? 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: Telephone number: | | | | | | |
| Email address: | | | | | | |