

Email: [planning@camden.gov.uk](mailto:planning@camden.gov.uk)  
 Phone: 020 7974 4444  
 Fax: 020 7974 1680

Development Management  
 Camden Town Hall Extension  
 Argyle Street  
 London WC1H 8EQ

## Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

### 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.

### 1. Applicant Name, Address and Contact Details

Title:	<input type="text" value="Mr"/>	First name:	<input type="text" value="M"/>	Surname:	<input type="text" value="Bown"/>		
Company name:	<input type="text"/>						
Street address:	<input type="text" value="c/o jdware architects"/>			Country Code	National Number	Extension Number	
	<input type="text" value="126 Caerleon Road"/>			Telephone number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>			Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/City:	<input type="text" value="Newport"/>			Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="Monmouthshire"/>			Email address:			
Country:	<input type="text" value="United Kingdom"/>			<input type="text"/>			
Postcode:	<input type="text" value="NP19 7GS"/>			<input type="text"/>			
Are you an agent acting on behalf of the applicant?				<input checked="" type="radio"/> Yes <input type="radio"/> No			

### 2. Agent Name, Address and Contact Details

Title:	<input type="text"/>	First Name:	<input type="text" value="Kirsty"/>	Surname:	<input type="text" value="Sullivan"/>		
Company name:	<input type="text" value="jdware architects"/>						
Street address:	<input type="text" value="126 caerleon road"/>			Country Code	National Number	Extension Number	
	<input type="text" value="newport"/>			Telephone number:	<input type="text"/>	<input type="text" value="01633 245020"/>	<input type="text"/>
	<input type="text" value="gwent"/>			Mobile number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
Town/City:	<input type="text"/>			Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text" value="Monmouthshire / Sir Fynwy"/>			Email address:			
Country:	<input type="text"/>			<input type="text" value="kirsty@jdware architects.co.uk"/>			
Postcode:	<input type="text" value="np197gs"/>			<input type="text"/>			

### 3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:	<input type="text" value="114"/>	Suffix:	<input type="text"/>
House name:	<input type="text"/>		
Street address:	<input type="text" value="Greencroft Gardens"/>		
	<input type="text"/>		
Town/City:	<input type="text" value="London"/>		
County:	<input type="text"/>		
Postcode:	<input type="text" value="NW6 3PJ"/>		

Description of location or a grid reference  
(must be completed if postcode is not known):

Easting:	<input type="text" value="525812"/>
Northing:	<input type="text" value="184261"/>

### 4. Eligibility

Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates?

Yes  No

If you are not the sole owner, has notification under article 9 of the DMPO been given?

Yes  No  Not applicable

### 5. Description of Your Proposal

Description of Approved Development:

Erection of lower ground floor rear extension with roof terrace over

Reference number:

\*Date of decision (DD/MM/YYYY):

What was the original application type?

Full planning permission

For the purpose of calculating fees, which of the following best describes the original application type?

- Householder development:** Development to an existing dwelling-house or development within its curtilage
- Other:** anything not covered by the above category

### 6. Non-Material Amendment(s) Sought

\*Please describe the non-material amendment(s) you are seeking to make:

To change the material of the flank wall of the approved extension to render, rather than brick work.

Are you intending to substitute amended plans or drawings?  Yes  No

If yes please complete the following

Old plan/drawing numbers:

New plan/ drawing numbers:

Please state why you wish to make this amendment:

client has requested that the finished be amended to render.

## 7. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes  No

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):

Officer name:

Title:  First name:  Surname:

Reference:

Date (DD/MM/YYYY):  (Must be pre-application submission)

Details of the pre-application advice received:

## 8. Site Visit

Can the site be seen from a public road, public footpath, bridleway or 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)

The agent  The applicant  Other person

## 9. 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

Do any of these statements apply to you?

Yes  No

## 10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. 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.



Date