

Email: 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 approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) 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: Ms	First name: JULIA	Surname:	FARR				
Company name	LONDON BOROUGH OF CAMDEN]					
Street address:	C/O AGENT		Country Code	National Number	Extension Number		
		Telephone number	:				
		Mobile number:					
Town/City		Fax number:					
County:							
Country:	United Kingdom	Email address:					
Postcode:							
Are you an agent acting on behalf of the applicant? Yes No							
2. Agent Name, Address and Contact Details							
Title: Ms	First Name: Poppy	Surname:	Carmody-Morgar	ו			
Company name:	Quod]					
Street address:	QUOD		Country Code	National Number	Extension Number		
	INGENI BUILDING	Telephone number	:				
	17 BROADWICK STREET	Mobile number:					
Town/City	LONDON	Fax number:					
County:							
Country:	United Kingdom	Email address:					
Postcode:	W1F 0AX	poppy.carmody-mo	organ@quod.com				

3. Site Address Det	tails					
Full postal address of the	e site (including full post	code where available)		Description:		
House:		Suffix:		LAND BOUNDED BY HAVERSTOCK ROAD		
House name:				WELLESLEY ROAD AND 2-16 VICARS ROA		
Street address:						
Town/City:						
County:						
Postcode:						
Description of location of						
(must be completed if po]			
Easting:	528052					
Northing:	185289					
	0 . h . t					
4. Pre-application						
Has assistance or prior ad	dvice been sought from	the local authority abou	it this application	on? • Yes ·	No	
If Yes, please complete the	he following informatior	h about the advice you v	vere given (this	will help the authority to deal with this ap	oplication more efficient	tly):
Officer name:						
Title: Mr	First name: NICK			Surname: BELL		
Reference:	EMAIL DATED 22/12/1	4				
Date (DD/MM/YYYY):	22/12/2014	(Must be pre-applica	tion submissior	1)		
Details of the pre-applica	ation advice received:	-				
ADVISED THAT IF THE RE HEIGHT	MOVAL OF THE FOUR TR	REES IS NECESSARY, SUI	TABLE REPLACE	MENTS WOULD BE FOUR LONDON PLANE	TREES SIZE 20-25CM D	IA AND 5.0-5.5M IN
5. Description of Pr	oposal					
•	•					
Please provide a descript		velopment as shown on	the decision le	tter:		
PLEASE REFER TO ATTAC					1	
Application reference nu		•			Date of decision:	25/04/2013
Please state the conditio	n number(s) to which th	is application relates:				
Condition number(s): PARTIAL DISCHARGE OF						
Has the development alr		Yes No				
<i>د</i>						

6. Discharge of Condition(s)

 Please provide a full description and/or list of the completed application form;

 Image: Council Own Development Drom;

 Image: Council Development Drom;

 Imad: Councintered application form;

 <t Please provide a full description and/or list of the materials/details that are being submitted for approval: Bacton Low Rise DHO Site Planting Schedule DHO_R05_op1; BLR_439_Designers Assumptions Management and Maintenance Rev 02 Opt1 Detailed Arrangement DHO Site Drg. No. HO-439_DA_001_R05_opt Tree Proposals DHO Site Drg. No. HO-439_DHO_TP_002_R05_Opt1 Ecological Enhancement Drg. No. HO-439_EC_003_R05_opt1 Hard Landscape plan courtyard 1 of 2 Drg. No. HO-439_HL_CY105_R05_opt1 Hard Landscape plan courtyard 2 of 2 Drg. No. HO-439_HL_CY205_R05_opt1 Soft Landscape plan courtyard 1 of 2 Drg. No. HO-439_SL_CY106_R05_opt1 Soft Landscape plan courtyard 2 of 2 Drg. No. HO-439_SL_CY206_R05_opt1 DHO Gateway Replacement Tree Planting Plan-With Crossover Drg. No. HO-439-200-115-Opt1Rev02 Tree Pit and Tree Planting Details Drg. No. HO-439-200-146 Replacement Plantanus x hispanica – Visualisation Tree Removal and Replacement Strategy Document (December 2014) The Arboricultural Method Statement

7. Part Discharge of Condition(s)							
Are you seeking to discharge only part of a condition? Yes No 							
If Yes, please indicate which part of the condition your application relates to: PARTIAL DISCHARGE OF CONDITION 29 (RELATING TO THE DHO SITE) AND FULL DISCHARGE OF CONDITION 31							
8. 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)							
The agent The applicant Other person							
9. 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.	\boxtimes	Date 02/02/2015					