

Email: planning@camden.gov.uk Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Regeneration and Planning London Borough of Camden Judd Street London WC1H 8ND

## 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 N  | ame, Address and Contact Details |                     |                 |                    |                     |
|-----------------|----------------------------------|---------------------|-----------------|--------------------|---------------------|
| Title: Mr       | First name: Michael              | Surname: Bat        | es              |                    |                     |
| Company name    | Beyond Eden Ltd                  |                     |                 |                    |                     |
| Street address: | 74 Redington Road                |                     | Country<br>Code | National<br>Number | Extension<br>Number |
|                 |                                  | Telephone number:   |                 |                    |                     |
|                 |                                  | Mobile number:      |                 |                    |                     |
| Town/City       | London                           | Fax number:         |                 |                    |                     |
| County:         |                                  |                     |                 |                    |                     |
| Country:        | United Kingdom                   | Email address:      |                 |                    |                     |
| Postcode:       | NW3 7RS                          |                     |                 |                    |                     |
|                 | e, Address and Contact Details   | is 🔿 No             |                 |                    |                     |
| Title:          | First Name: Sarah                | Surname: Bro        | die             |                    |                     |
| Company name:   | Beyond Eden Ltd                  |                     |                 |                    |                     |
| Street address: | 4 Patshull Place                 |                     | Country<br>Code | National<br>Number | Extension<br>Number |
|                 |                                  | Telephone number:   |                 | 07976328996        |                     |
|                 |                                  | Mobile number:      |                 |                    |                     |
| Town/City       | London                           | Fax number:         |                 |                    |                     |
| County:         |                                  |                     |                 |                    |                     |
| Country:        |                                  | Email address:      |                 |                    |                     |
| Postcode:       | NW5 2LA                          | beyondedenItd@bluey | onder.co.uk     |                    |                     |

| 3. Site Address  | Details             |                                      |   |                       |                           |                               |         |  |  |
|--|---------------------|--------------------------------------|---|-----------------------|---------------------------|-------------------------------|---------|--|--|
| Full postal address  | of the site (includ | ing full postcode whe                | re available)   | Description:          |                           |                               |         |  |  |
| House:   | 74                  | Suffix:                              |   |                       |                           |                               |         |  |  |
| House name:  |                     |                                      |   |                       |                           |                               |         |  |  |
| Street address:  | Redington Road      |                                      |   |                       |                           |                               |         |  |  |
|  |                     |                                      |   |                       |                           |                               |         |  |  |
| Town/City:   | London              |                                      |   |                       |                           |                               |         |  |  |
| County:  | Camden              |                                      |   |                       |                           |                               |         |  |  |
| Postcode:  | NW3 7RS             |                                      |   |                       |                           |                               |         |  |  |
| Description of locat<br>(must be completed   |                     |                                      |   |                       |                           |                               |         |  |  |
| Easting:   | 525761              |                                      |   |                       |                           |                               |         |  |  |
| Northing:  | 186315              |                                      |   |                       |                           |                               |         |  |  |
|  |                     |                                      |   |                       |                           |                               | 2       |  |  |
| 4. Pre-applicat  | ion Advice          |                                      |   |                       |                           |                               |         |  |  |
| Has assistance or pr   | ior advice been s   | ought from the local a               | authority about this application                                | on?                   | • Yes                     | No                            |         |  |  |
| If Yes, please compl   | ete the following   | information about th                 | e advice you were given (this                                   | s will help the autho | rity to deal with this ap | oplication more efficiently): |         |  |  |
| Officer name:  |                     |                                      |   |                       |                           |                               |         |  |  |
| Title:   | First name:         | Leela                                |   | Surname:              | Muthoora                  |                               |         |  |  |
| Reference:   | 2015/081            | D/P                                  |   |                       |                           |                               | _       |  |  |
| Date (DD/MM/YYYY   | ): 20/05/201        | 15 (Must k                           | be pre-application submission                                   | n)                    |                           |                               |         |  |  |
| Details of the pre-ap  | oplication advice   | received:                            |   |                       |                           |                               |         |  |  |
| After planning pern  | nission was grant   | ed I consulted Leela N               | luthoora on how to prepare f                                    | for the approval of c | letails                   |                               |         |  |  |
| 5. Description o   | of Proposal         |                                      |   |                       |                           |                               | _       |  |  |
|  |                     |                                      |   |                       |                           |                               |         |  |  |
|  |                     |                                      | t as shown on the decision le                                   |                       | lace bard surface         |                               | ٦       |  |  |
| Alterations to front boundary wall to reposition entrance gate and brick piers, install metal railings and replace hard surface   Application reference number: 2015/0810/P   Date of decision: 19/05/2015 |                     |                                      |   |                       |                           |                               |         |  |  |
|  |                     | 2015/0810/P<br>to which this applica | tion relates:   |                       |                           | Date of decision: 19/05/2015  |         |  |  |
| Condition number(  |                     | to which this applica                | nonneiates.   |                       |                           |                               |         |  |  |
| 2 and 4  |                     |                                      |   |                       |                           |                               |         |  |  |
| Has the developme  | nt already started  | l? C Yes                             | No  |                       |                           |                               |         |  |  |
|  |                     |                                      |   |                       |                           |                               | $\prec$ |  |  |
| 6. Discharge of  | Condition(s)        |                                      |   |                       |                           |                               |         |  |  |
| Please provide a full description and/or list of the materials/details that are being submitted for approval:  |                     |                                      |   |                       |                           |                               |         |  |  |
| A piece of sawn York stone<br>A board of brick slips produced by a brick matching service employed by Travis Perkins. These are lbstock bricks and are named 'Medium Multi'                                |                     |                                      |   |                       |                           |                               |         |  |  |
| 7. Part Discharg   |                     |                                      |   |                       |                           |                               | 4       |  |  |
| Are you seeking to   | -                   |                                      | ○ Yes ● M   | lo                    |                           |                               |         |  |  |
|  |                     |                                      |   |                       |                           |                               | $\prec$ |  |  |
| 8. Site Visit  |                     |                                      |   |                       |                           |                               |         |  |  |
| Can the site be seer   | n from a public ro  | ad, public footpath, b               | ridleway or other public land                                   | ?                     | 💽 Yes 🔿 No                | )                             |         |  |  |
| If the planning auth   | ority needs to ma   | ake an appointment to                | o carry out a site visit, whom                                  | should they contact   | ? (Please select only o   | ne)                           |         |  |  |
| • The agent  | ○ The app           | olicant Other                        | r person  |                       |                           |                               |         |  |  |
|  |                     |                                      |   |                       |                           |                               | $\prec$ |  |  |
| 9. Declaration   |                     |                                      |   |                       |                           |                               |         |  |  |
|  |                     |                                      | cribed in this form and the ac<br>//our knowledge, any facts st |                       |                           |                               |         |  |  |
|  |                     | ons of the person(s) g               |   |                       |                           | Date 01/07/2015               |         |  |  |
|  |                     |                                      |   |                       |                           | L                             |         |  |  |