

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 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 N	lame, Address and Contact Details				
Title:	First name:	Surname:			
Company name	Kahuna Ltd				
Street address:	C/O Agent		Country Code	National Number	Extension Number
		Telephone number:			
		Mobile number:			
Town/City County:		Fax number:			
Country:	United Kingdom	Email address:	•		
Postcode:					
Are you an agent	acting on behalf of the applicant?	es O No			
2. Agent Nam	e, Address and Contact Details				
Title: Mr	First Name: Henry	Surname: Co	urtier		
Company name:	Pegasus Group				
Street address:	23 Hanover Square		Country Code	National Number	Extension Number
		Telephone number:		0203 705 8060	
		Mobile number:			
Town/City	London	Fax number:			
County:	London				
Country:		Email address:			
Postcode:	W1S 1JB	henry.courtier@pegasu	uspg.co.uk		

3. Site Address							
Full postal address of		ng full postcode where a	available)	Description:			
House:	74	Suffix:					
House name:							
Street address:	Charlotte Street						
Town/City:	London						
County:	Camden						
Postcode:	W1T 4QH						
Description of location (must be completed							
Easting:	529388						
Northing:	181827						
4. Eligibility							
4. Eligibility							
		f you are making this t of the land to which th	nis amendment relates?		• Yes No		
If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given? Yes No Not applicable							
5. Description	of Your Prop	osal					
Description of Appro	ved Developmen	t:					
terrace at second floo	or level, plus exca	vation to form a baseme	ent level with front light w			nsard roof level with rear terrace, rear asement and ground floors and 4 x	
residential flats on upper floors to be communally accessed from Charlotte Mews. 2012/2133/P							
*Date of decision (DD/MM/YYYY): 20/09/2013							
What was the original application type?							
Full planning permission							
For the purpose of ca	alculating fees, wh	nich of the following bes	st describes the original ap	pplication type?			
○ Householder d	levelopment: De	velopment to an existin	g dwelling-house or deve	lopment within its c	urtilage		
Other: anything not covered by the above category							
6. Non-Materia	al Amendmer	nt(s) Sought					
*Please describe the	e non-material am	endment(s) vou are see	king to make:				
*Please describe the non-material amendment(s) you are seeking to make: Provision of a reduced area of skylight servicing the restaurant (Class A3) in order to accommodate a storage room for a water tank servicing the development.							
Are you intending to	o substitute amen	ded plans or drawings?	Yes	○ No			
If yes please comple	ete the following						
Old plan/drawing nu	umbers:	11012 (PL)011 Rev A; 1	1012(PL)012 Rev A.				
New plan/ drawing r	numbers:	57802/100-03A Rev A;	57802/100-04A Rev A.				
Please state why you wish to make this amendment:							
					ank room at first floor leve re is no increase in habitab	I. ble accommodation as a result of the	
7. Pre-applicati	ion Advice						
		ought from the local aut	hority about this applicati	on?	Yes • N	0	
Tias assistante or pri	ioi advice peeli 30	agin nom the local aut		O111	(103 (N	<u> </u>	

8. Site Visit						
Can the site be seen	from a public road, public	footpath, bridleway or other public land?	○ Yes ● I	No		
If the planning author	ority needs to make an app	pointment to carry out a site visit, whom should they o	ontact? (Please select only	one)		
• The agent	The applicant	Other person				
9. Authority Em	nployee/Member					
(b) an ele (c) relate	Authority, I am: mber of staff ected member d to a member of staff ed to an elected member	Do any of these statements apply to you?	○ Yes •	No No		
10. Declaration						
additional information		sent as described in this form and the accompanying e best of my/our knowledge, any facts stated are true person(s) giving them.		\boxtimes	Date	22/06/2015