

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 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: Mr	First name: Sean	Surname: Cor	nrad					
Company name								
Street address:	239 Mitcham Road		Country Code	National Number	Extension Number			
		Telephone number:						
		Mobile number:						
Town/City	London	<b>.</b>		7				
County:		Fax number:						
Country:	United Kingdom	Email address:						
Postcode:	SW17 9JG							
Are you an agent ac	cting on behalf of the applicant? Yes	O No						
2. Agent Name	, Address and Contact Details							
Title: Mr	First Name: Sean	Surname: Cor	nrad					
Company name:								
Street address:	239 Mitcham Road		Country Code	National Number	Extension Number			
		Telephone number:	020	86722333				
		Mobile number:	077	35367136				
Town/City	London	Fax number:						
County:								
Country:	United Kingdom	Email address:						
Postcode:	SW17 9JG	sean@cpkgroup.co.uk						
3. Description of the Proposal								
Please describe the	proposed development including any change of use:							
Change of use of the ground floor from doctor's surgery (Use Class D1) to a three-bedroom self-contained residential unit (Use Class C3).  There are no external changes proposed and only minor internal alterations to help create a high quality family sized unit in this prominent location. All historic, characterful internal features will be retained as part of the refurbishment works where they are not already beyond repair.								
Has the building, work or change of use already started?  Yes   No								

004485005

4. Site Address	S Details		
Full postal address	of the site (including full postcod	e where available)	Description:
House:	125 Sul	ffix:	
House name:			
Street address:	West End Lane		
Town/City:	London		
County:	Camden		
Postcode:	NW6 2PB		
	tion or a grid reference d if postcode is not known):		
Easting:	525394		
· ·	184274		
Northing:	104274		
5. Pre-applicat	ion Advice		
• •	rior advice been sought from the	local authority about this ar	pplication?
	G	,	
If Yes, please comp	lete the following information ab	out the advice you were giv	ven (this will help the authority to deal with this application more efficiently):
Officer name:			
Title: Mr	First name: David		Surname: Fowler
Reference:	Duty Planner		
Date (DD/MM/YYY)	,	Must be pre-application sub	omission)
	pplication advice received:		
formal details of cy			urvey given that the designated bay for the doctor would be removed. Also advised that no be located should be sufficient. Also advised that given that there is no excavation or
	11/1:14 5 1	15: 11 6:4	
6. Pedestrian a	and Vehicle Access, Roads	and Rights of Way	
Is a new or altered	vehicle access proposed to or fro	n the public highway?	
Is a new or altered	pedestrian access proposed to or	from the public highway?	
Are there any new	public roads to be provided with	n the site?	Yes   No
Are there any new	public rights of way to be provide	ed within or adiacent to the	site? Yes • No
-		-	
Do trie proposais re	equire any diversions/extinguishr	lents and/or creation or rigi	ints of way?
7. Waste Stora	ge and Collection		
Do the plans incorp	porate areas to store and aid the c	collection of waste?	<ul><li>Yes</li><li>No</li></ul>
If Yes, please provid	de details:		
			with 'wheelie bins' stored and collected from the front garden area. It is proposed that this is
	ained under this application with		
_	s been made for the separate stor	age and collection of recycle	able waste? Yes No
If Yes, please provide The proposed refus	se store will have sufficient capaci	ty for separate storage for re	ecycling.
	·	-	
8. Authority Er	nployee/Member		
With respect to the	Authority, I am: ember of staff		
(b) an e	lected member		
• • •	ed to a member of staff red to an elected member		
.,		Do any of these statem	nents apply to you? Yes   No
9. Materials			
Please state what n	naterials (including type, colour a	nd name) are to be used ext	ternally (if applicable):

9. (Materials continued)	
Walls - description:	
Description of <i>existing</i> materials and finishes:	
Brick	
Description of <i>proposed</i> materials and finishes:	
No external changes proposed	
Roof - description:	
Description of <i>existing</i> materials and finishes: Slate	
Description of <i>proposed</i> materials and finishes:	
No external changes proposed	
Windows - description:	
Description of existing materials and finishes:	
Timber	
Description of <i>proposed</i> materials and finishes:	
No external changes proposed	
<b>Doors - description:</b> Description of <i>existing</i> materials and finishes:	
Timber	
Description of <i>proposed</i> materials and finishes:	
No external changes proposed	
Boundary treatments - description:	
Description of <i>existing</i> materials and finishes:	
Dwarf wall/hedges	
Description of proposed materials and finishes:	
No changes proposed	
Vehicle access and hard standing - description: Description of <i>existing</i> materials and finishes:	
N/A	
Description of <i>proposed</i> materials and finishes:	
N/A	
Lighting - add description	
Description of existing materials and finishes:	
N/A	
Description of <i>proposed</i> materials and finishes:	
N/A	
Others - description:	
Type of other material:	
Description of <i>existing</i> materials and finishes:	
N/A	
Description of <i>proposed</i> materials and finishes:	
N/A	
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement?	Yes No
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:	
Location Plan:	
Location Plan 1:1250 Existing Drawings:	
DWG No.: 15-114-100A1	
DWG No.: 15-114-101A3 Proposed Drawings:	
DWG No.: 15-114-200A1	
DWG No.: 15-114-201A3Cycle/Bin Store Drawings: DWG No.: 15-114-202A1	
DWG No.: 15-114-203A3	
Design and Access Statement	

Please provide information on the existing an	d proposed number of on-site parking	g spaces:	
Type of vehicle	Existing number of spaces	er Total proposed (including retained)	g spaces Difference in spaces
Cars	0	0	0
Light goods vehicles/public carrier veh	icles 0	0	0
Motorcycles	0	0	0
Disability spaces	0	0	0
Cycle spaces	0	0	0
Other (e.g. Bus)	0	0	0
Short description of Other			
11. Foul Sewage			
Please state how foul sewage is to be dispose	d of:		
Mains sewer 🔀	Package treatment plan	t	Unknown
Septic tank	Cess pit		
Other			
Are you proposing to connect to the existing	drainage system?	Yes No Unknown	
If Yes, please include the details of the existing	g system on the application drawings	and state references for the plan(s)/draw	vina(s):
Plans	3.		307
Existing Drawings:			
DWG No.: 15-114-100A1 DWG No.: 15-114-101A3			
Proposed Drawings:			
DWG No.: 15-114-200A1			
DWG No.: 15-114-201A3			
12. Assessment of Flood Risk			
Is the site within an area at risk of flooding? (R flood zones 2 and 3 and consult Environment requirements for information as necessary.)		al planning authority	No
If Yes, you will need to submit an appropriate	flood risk assessment to consider the		
Is your proposal within 20 metres of a waterco	ourse (e.g. river, stream or beck)?	◯ Yes <b>⑥</b> No	
Will the proposal increase the flood risk elsew	here? Yes • No	)	
How will surface water be disposed of?			
Sustainable drainage system	Main sewe	r	Pond/lake
Soakaway	Existing wa	atercourse	
	Existing we	nercourse	
13. Biodiversity and Geological Co	nservation		
To assist in answering the following question: or geological conservation features may be p			able likelihood that any important biodiversity
Having referred to the guidance notes, is ther on land adjacent to or near the application sit		ving being affected adversely or conserve	ed and enhanced within the application site, OR
a) Protected and priority species			
Yes, on the development site	Yes, on land adjacent to or near	the proposed development	<ul><li>No</li></ul>
b) Designated sites, important habitats or oth	er biodiversity features		
Yes, on the development site	Yes, on land adjacent to or near	the proposed development	<ul><li>No</li></ul>
c) Features of geological conservation import	ance		
Yes, on the development site	Yes, on land adjacent to or near	the proposed development	<ul><li>No</li></ul>

10. Vehicle Parking

14. Existing Use													
Please describe the current use of the site:													
The current site is vacant. The site was previously used as a doctors' surgery.													
	currently vacant		~	Yes	O No								
	ase describe the								/ 0			ultura Alederica	
'							ssur	gery (Use Class D1) for over	60 years up	until its ci	osure ea	irlier this yea	ar.
When did this use end (if known) (DD/MM/YYYY)?  Does the proposal involve any of the following?  If we you will peed to submit an appropriate contemporation assessment with your application.													
If yes, you will need to submit an appropriate contamination assessment with your application.  Land which is known to be contaminated?  Yes  No													
Land where contamination is suspected for all or part of the site?  Yes No													
A proposed use that would be particularly vulnerable to the presence of contamination?  Yes  No													
The operated and that would be particularly varied and to the presence of contamination:													
15. Tree	es and Hedge	es .											
Are there	trees or hedges o	on the pro	posed dev	elopmen	t site?	• ,	Yes	O No					
							site	that could influence the		res (•)	No		
	ent or might be	•	•		•		41	-!!!	~				464
accompar	nying plan should	ne above, d be subm	you <u>may</u> n itted along	eed to pr gside you	r applicatio	n. Your local pla	ıne anni	discretion of your local plan ng authority should make cl	ear on its w	rity. II a Tre rebsite wha	e surve at the su	y is required irvey should	contain, in
accordanc	ce with the curre	nt 'BS5837	: Trees in r	elation to	design, de	molition and co	onsti	ruction - Recommendations	<b>'</b> .			J	
$\subseteq$													
16. Trac	de Effluent												
Does the p	proposal involve	the need	to dispose	of trade	effluents or	waste?		C Yes (	<ul><li>No</li></ul>				
$\equiv$													
17. Resi	dential Units	6											
Does your	proposal includ	e the gain	or loss of r	esidentia	ıl units?	(	•	Yes No					
Market H	ousing - Propos	ed						Market Housing - Existir	ng				
			Nur	mher of h	edrooms			_	1	Nur	nher of	bedrooms	
		1	2	3	4+	Unknown			1	2	3	4+	Unknown
Houses		'	<u> </u>	3	1	OTIKTIOWIT		Houses	+ '-	2	3	41	OTIKITOWIT
Flats/Mai	conottos	1						Flats/Maisonettes					
Live-Worl		I						Live-Work units					
Cluster fla								Cluster flats					
Sheltered								Sheltered housing					
Bedsit/St								Bedsit/Studios					
Unknowr	1							Unknown					
Proposed	Market Housing	Total		1				Existing Market Housing	Total		0		
Overall R	esidential Unit	Totals											
	Total pro	posed res	idential un	its		1							
	Total ex	istina resid	dential uni	ts		0							
18. All T	ypes of Deve	elopme	nt: Non-	residei	ntial Floo	rspace							
Does your	proposal involv	e the loss,	gain or cha	ange of u	se of non-re	esidential floors	spac	e?	<ul><li>Yes</li></ul>	○ No	)		
						sting gross		Gross internal floorspace to be		ss new inte			itional gross
	Use class	type of us	se			nternal oorspace		lost by change of use or	floorspa (including	ace propos changes o			floorspace development
						are metres)		demolition (square metres)		are metres)			re metres)
A1	Shops	Net Trada	able Area				0.0	(square metres)				0.0	
A2	Financial a			ces			0.0	0.0				0.0	
A3		aurants ar					0.0	0.0			0.0		0.0
A4	Drink	ing estabi	shments				0.0	0.0			0.0		0.0
A5		food take					0.0	0.0			0.0		0.0
		e (other th											
B1 (a)		•	-				0.0	0.0			0.0		0.0
B1 (b)	Research and development 0.			0.0	0.0			0.0		0.0			

18. AII	Types of Deve	elopment	: Non-reside	ential F	loorspace (cont	tinued)					
B1 (c)	Light industrial			0.0	0.0		0.0		.0 0.0		
B2	Gen	eral industria	al		0.0		0.0		0.0		0.0
B8	Storage or distribution			0.0		0.0		0.0		0.0	
C1	1 Hotels and halls of residence			0.0		0.0		0.0		0.0	
C2	Reside	ntial instituti	ons		0.0		0.0		0.0		0.0
D1	Non-resid	dential institu	utions		131.0		0.0		0.0		0.0
D2	Assen	nbly and leisu	ıre		0.0		0.0		0.0		0.0
Other	Ple	ease Specify			0.0		0.0		0.0		0.0
		Total			131.0		0.0		0.0		0.0
For hotels	, residential institu	tions and ho	stels, please ad	ditionally	indicate the loss or	gain of rooms:					
l	Jse Class	Туре	s of use	Existing	rooms to be lost by or demolition			s proposed (including anges of use)		Net additional ro	oms
19. Emp	oloyment										
-	please complete th	ne following	information red	nardina e	mnlovees <sup>.</sup>						
II KHOWII,	picase complete ti	ic rollowing	Full-tim		Part-time			Equivalent number o	f full-ti	me	
	Existing employee	es	0		0			0			
	Proposed employe	ees	0		0		0				
20 Hou	ırs of Opening								_		
			ng (o.g. 15:20) f	or oach n	on residential use n	roposod:					
II KIIOWII,				UI EACITI	on-residential use p						T
Use	Mo Start Tir	nday to Frida ne End	ay d Time		Satu Start Time	rday End Time		Sunday and B Start Time		olidays d Time	Not Known
21. Site	Δτρα										
21. Jilo	Aica										
What is th	ne site area?	00.02	hectar	es							
22. Indu	ustrial or Comi	mercial Pr	ocesses and	d Mach	inery						
Please des	scribe the activities	and process	ses which would	d he carri	ed out on the site an	nd the end prod	lucts including	g plant, ventilation or ai	ir cond	itioning Please in	clude the
type of ma	achinery which ma							g plant, ventuation et al			
N/A	posal for a waste m	anagement	development?			. V C N	1-				
is the prop	posarior a waste ii	lanagement	<u>development:</u>		С	Yes • N	No .				
23. Haz	ardous Substa	nces									
Is any hazardous waste involved in the proposal? Yes No											
24. Site Visit											
								_			
Can the si	te be seen from a p	oublic road, p	oublic footpath	, bridlewa	ay or other public lar	nd?	•	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											
25. Cert	ificates (Certi	ficate B)									
	,	•			Certificate of Own	ership - Certifi	cate B				
Loomie / T				•	ent Management F	Procedure) (En	gland) Order	2015 Certificate unde			o€+b!o
application	n, was the owner (	owner is a pei	rson with a freeh	nold intere	est or leasehold intere	est with at least 7	7 years left to r	elow) who, on the day 2 un) and/or agricultural t	tenant		
meaning given in section 65(8) of the Town and Country Planning Act 1990) of any part of the land or building to which this application relates.											

Ref: 04: 6099 Planning Portal Reference:

004485005

25. Certifi	cates (Certificate B - continued)									
	ultural Tenant	Date notice served								
Name	Caroline Jane Muir Grasse									
Number:	1 Suffix: House name:									
Street:	Menelik Road									
Locality:	West Hampstead 03/08/2015									
Town:	London									
Postcode:	NW2 3RS									
Name	Nicholas Grasse									
Number:	1 Suffix: House name:									
Street:	Menelik Road	03/00/2015								
Locality:	West Hampstead	03/08/2015								
Town:	London									
Postcode:	NW2 3RS									
Name	Robert Squance									
Number:	1 Suffix: House name:									
Street:	Menelik Road	03/08/2015								
Locality:	West Hampstead	03/00/2013								
Town:	London									
Postcode:	NW2 3RS									
Title: Mr	First name: Sean Surname: Conrad									
Person role:	Agent Declaration date: 03/08/2015	Declaration made								
26. Declar	ation									
additional inf	pply for planning permission/consent as described in this form and the accompanying plans/drawings ar ormation. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and a n are the genuine opinions of the person(s) giving them.									