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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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## 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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address		2. Agent	Name and Address
Title:	MR ENDS First name:	Title:	MR First name: HEVRY
Last name:	ETINGEN	Last name:	BUSIAKIEWICZ
Company (optional):		Company (optional):	BB PARTNERIHID.
Unit:	House number: FUT II House suffix:	Unit:	House number: House suffix:
House name:		House name:	
Address 1:	ODLOMBUS DRIVE	Address 1:	SNUPIO 33-34
Address 2:	SPANIARDS ROAD	Address 2:	10 hornger gt.
Address 3:		Address 3:	
Town:	MOCHON	Town:	LONDON
County:		County:	
Country:		Country:	
Postcode:	#w3 7JD	Postcode:	N7 BEL

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?				
Unit: House number: 55 House suffix:	authority about this application?  Yes  No				
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: LANCASTER GROVE	application more efficiently). Please tick if the full contact details are not				
Address 2:	known, and then complete as much as possible:				
Address 3:	Officer name:				
Town: LONDON	Reference:				
County:					
Postcode (optional): TWB AHD  Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)  Details of pre-application advice received?				
Easting: Northing:					
Description:					
5. Description Of Your Proposal					
Please provide a description of the approved development as shown and date of decision in the sections below:	on the decision letter, including the application reference number				
ENECATON OF GITCLE STOREY CHOUND FLOOR REAN EXTENSION FOR STUDIES OF STUDIES BY THE PLANT OF EXTENSION, ELANGEMENT OF EXTENSION OF THE PROPERTY OF THE PROPERT					
Reference number: 2015/03) P. Date of decision: 20/8/15 (Date must be pre-application of RS)					
Please state the condition number(s) to which this application relates	A1717 1/LUT				
1. april 12011 5	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	☐ Yes   No				
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)				
Has the development been completed?					
If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)					
6. Discharge Of Condition					
Please provide a full description and/or list of the materials/details that are being submitted for approval:					
PATTER OF APPOINTMENT DATED 25 SEPT 2015 POVERING WESTER FROM MMP TO CAMBER 25 SENT 2015					
COVERING WETER MOU MMP TO CAMBER 28 GERT 2015					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition?  If Yes, please indicate which part of the condition your application relates to:					

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.					
The original and 3 copies of a completed and dated application form:  The original and 3 copies of a completed and dated application form:		original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:			
The correct fee:					
information. I/we confirm that, to the best genuine opinions of the person(s) giving t Signed - Applicant:  Date (DD/MM/YYYY):	t of my/our knowledge, any	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the POLAE OT SEHAGE OF Or signed, Agent: PALTHER JUIP OT DESCRIPTION OF SIGNEY AGENT.			
10. Applicant Contact Details		11. Agent Contact Details			
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax humber (optional):	Extension number:	Telephone numbers  MANY BUSHARIFUNICA  Extension number:  DAD  T336 8555  Country code: Mobile number (optional):  D7771 887690  Country code: Fax number (optional):  Email address (optional):  HEATT & BBPHARTHERSUP. LOUK.			
12. Site Visit  Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No					
f the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)  Agent Applicant Other (if different from the agent/applicant's details)					
If Other has been selected, please provide Contact name:	:	Telephone number:			
Jonast Harris.	12 11 100				

Email address: