

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 removal or variation of a condition following grant of planning permission. 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 Na	ame, Address and	Contact Details						
Title: Ms	First name: M	arion	Surname:	deCarte				
Company name	Guilford Limited							
Street address:	PO Box 472			Country Code	National Number	Extension Number		
	St Julian's Court		Telephone number	r:				
	St Julian's Avenue		Mobile number:					
Town/City	St Peter Port							
County:	Guernsey		Fax number:					
Country:	United Kingdom		Email address:					
Postcode:	GY1 6AX							
Are you an agent a	Are you an agent acting on behalf of the applicant? • Yes • No							
2. Agent Name	, Address and Co	ntact Details						
Title: Mr	First Name: Or	·la	Surname:	O Kane				
Company name:	OOK Architects							
Street address:	119 Farringdon Road		Telephone number	Country Code r:	National Number	Extension Number		
			Mobile number:					
Town/City	London		Mobile number:					
			Fax number:					
County:	London		Email address:					
Country:	United Kingdom			com				
Postcode:	EC1R 3DA		ook@ookarchitects.com					

3. Site Address	Details									
Full postal address	of the site (includin	g full postcode where available)	Desc	cription:						
House:	67	Suffix:								
House name:										
Street address:	Guilford Street									
Town/City:	London									
County:	Camden									
Postcode:	WC1N 1DF									
1 Ostcode.										
Description of location or a grid reference (must be completed if postcode is not known):										
Easting: 530264										
Northing:										
4. Pre-applicat	ion Advice									
		ught from the local authority about th	nis application?		Yes • No					
5. Description of	of Droposal									
5. Description (л гторозаі									
Please provide a de	scription of the app	proved development as shown on the	decision letter:							
			om and 2x 1 bedr	oom self con	ntained residential units (Class C3) and associated works including					
the erection of a 2 storey part width rear extension and rear dormer.										
Application referen	L	2013/3903/P			Date of decision: 18/03/2014					
		o which this application relates:								
Condition number(S):									
Has the developme	ent already started?	Yes No								
Thas the developme	an eddy started.	163 (140								
6. Condition(s)	- Removal									
Please state why you wish the condition(s) to be removed or changed: We wish to divide the 3 bedroom unit that's comprised of the lower and upper ground floors into two separate 2 bedroom units.										
If you wish the existing condition to be changed, please state how you wish the condition to be varied:										
To reflect the included drawings instead of those previously submitted.										
7. 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										
8. Certificates	(Certificate A)									
	Town and Cou		e of Ownership -							
Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/the applicant was the owner (owner is a person with a										
					olication relates, and that none of the land to which the application the definition of "agricultural tenant" in section 65(8) of the Act).					
			33 3							
Title: Ms	First name:	Orla		Surname:	O'Kane					
Person role: Ago	ent	Declaration date:	28/10/2015		Declaration made					
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	opinions given are the genuine opinions of the person(s) giving them. Date 28/10/2015									