

Email: pla

planning@camden.gov.uk

Phone:

020 7974 4444

Fax: 020 7974 1680

If Yes, please state the date when the building, work

or change of use was completed: (DD/MM/YYYY):

906/070W/F

Development Management Regeneration and Planning London Borough of Camden Judd Street London WC1H 8ND

(date must be pre-application submission)

Application for Planning Permission. Town and Country Planning 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. t 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 First name: PETER Title: Title: First name: CHRIS WARPS Last name: SMITH Last name: Company Company MAZE PLANNING UD RUSSEUS SOUCTERS (optional): (optional): House House Unit: Unit: number: SLIffix. House House REGENCY HOUSE name: name: 1-4 WARWICK STREET ROOUS CLOSE Address 1: Address 1: Address 2: Address 2: Address 3: Address 3: LONDON WELWAN GARDEN CITY Town: Town: County: County: HERFORDSHIRE UNITED KINGDOM Country: UNITED WINGDOM Country: Postcode: Postcode: WIB5LI AUS GIT 3. Description of the Proposal Please describe the proposed development, including any change of use: CHANGE OF USE OF A BI RECORDING STUDIO, TO FORM AND RETIDENTIAL APARTMENTS, (2 x 200 BEDROOMS AND 2 x 100 BEDROOMS) AND A BI COSSICE) SUITE, WITH RELATED EXTERNAL ANGRAPIONS. , No Has the building, work or change of use already started? Yes If Yes, please state the date when building, (date must be pre-application submission) work or use were started (DD/MM/YYYY): 7 Yes Has the building, work or change of use been completed?

4. Site Address Details	5. 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: 17 House suffix:	authority about this application?
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: FLEET ROAD	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: Lowbon	
County:	Reference:
Postcode (optional): NW3 ZQR	
(optional): NW 9 CONT Description of location or a grid reference.	Date (DD/MM/YYYY):
(must be completed if postcode is not known):	(must be pre-application submission) \(\bigcup \lambda / \Delta \)
Easting: Northing: Description:	Details of pre-application advice received?
Description:	
NA	N/A
	· ·
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste?
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway?	
	N/A ATTHIS SCAGE.
Are there any new public roads to be provided within the site? Yes No	
Are there any new public	
rights of way to be provided within or adjacent to the site?	
Do the proposals require any diversions	Have arrangements been made
/extinguishments and/or	for the separate storage and
dication of rights of way:	collection of recyclable waste?
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
N/A	N/A ATTHIS STAGE
1	
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff (b) an elected member	Do any of these statements apply to you? Yes No
(c) related to a member of staff	
(d) related to an elected member	r
If Yes, please provide details of the name, relationship and role	
N/t	
' /	

te what materials are to be used extern	nally. Include type,	colour and name for e	ach material:					
Existing (where applicable)	Propo	osed		Not applicable	Don't Know			
			1					
AU TO BE	E	SEG PROP	oses Theretions					
RETAINED		and floor	15					
		/						
itional information on submitted plan(s)/drawing(s)/desig	gn and access stateme	nt? Yes		No			
	n and access state	ment:		 .				
ACCEST STATEMENT	·							
g								
	T							
Type of Vehicle Total Total proposed (including Difference spaces retained) in spaces								
	Existing (where applicable) Au To Bacteria (where applicable) Au To Bacteria (where applicable) Au To Bacteria (where applicable) Itional information on submitted plant (where applicable) Total Existing (where applicable) Au To Bacteria (where applicable) Au Co Bacteria (where applicable) Au To Bacteria (where applicable) Au To Bacteria (where applicable) Au Co Bacteria (where applicable	Existing (where applicable) AU TO BE RETAINED tional information on submitted plan(s)/drawing(s)/designences for the plan(s)/drawing(s)/design and access states ACCEST SCATEMENT g mation on the existing and proposed number of on-site part of the plan on the existing and proposed number of on-site part of the plan on the existing and proposed number of on-site part of the plan on the existing and proposed number of on-site part of the plan of the existing and proposed number of on-site part of the plan of the existing and proposed number of on-site part of the plan of the existing and proposed number of on-site part of the plan of the existing and proposed number of the plan of	Existing (where applicable) Au To BC RETAINED Au Ran RETAINED Au Ran Au To BC RETAINED Au Ran Au To BC RETAINED Au Ran Au To BC RETAINED Au Ran Au Ran Au To BC RETAINED Au Ran Au Ran Au To BC RETAINED Au Ran Au Ran	(where applicable) AU TO BY SEE PROFOSED EXTERNAL ATTERATIONS ON RANS tional information on submitted plan(s)/drawing(s)/design and access statement? ACCEST SCATEMENT g mation on the existing and proposed number of on-site parking spaces: Total Total proposed (including Difference	Existing (where applicable) Proposed Propose			

Type of Vehicle	Total Existing	Total proposed (including spaces retained)	Difference in spaces
Cars	0	0	0
Light goods vehicles/ public carrier vehicles			
Motorcycles			
Disability spaces			
Cycle spaces	0	+4	+4
Other (e.g. Bus)			
Other (e.g. Bus)			

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
	How will surface water be disposed of?
N/A AT THIS SCAGE	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
-	Main sewer
	<u> </u>
13. Biodiversity and Geological Conservation	14. Existing Use
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:
notes for further information on when there is a reasonable likelihood that any important biodiversity or geological	BI RETORDING SWDDO
conservation features may be present or nearby and whether they are likely to be affected by your proposals.	
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	N/A
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	
No	When did this use end (if known)? DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate)
Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable Yes No
No	to the presence of contamination?
15. Trees and Hadres	(a) Total Seguent
15. Trees and Hedges Are there trees or hedges on the	16. Trade Effluent Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character?	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
If Yes to either or both of the above, you may need to provide a full	20 }
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction. Pecompendations'	N/A

17. Residential Un Does your proposal in If Yes, please complete	clude th	ne qai	in, los	s or cl	hange	e of use of	resider low:	ntial units? Yes		V o					
Proposed Housing						Existing Housing									
Market Housing	Not known	1	Num 2	ber of		ooms Unknown	Total						Bedr 4+	ooms Unknown	Tota
Houses					<u> </u>			Houses		l ·	 ~		· ·		
Flats and maisonettes		2	2				4	Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	T	otals	(a + b) + C +	d + e	+ f + g) =	4		Т	otals	(a + t) + C +	d + e	+ f + g) =	
Social Rented	Not known	1	Numi 2	per of	Bedre 4+	ooms TUnknown	Total	Social Rented	Not known	1	Numi 2	ber of		rooms Tot	
Houses		·	_	Ů	<u> </u>			Houses		<u> </u>	-	<u>_</u> _	41	OTIKTIOWIT	
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							П
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios				_			
Unknown type								Unknown type							
	Te	otals	(a + b	+ C +	d + e	+ f + g) =			T.	otals	(a + t) + C +	d+e	+f+g)=	1
Intermediate	Not known		Numl 2	oer of		ooms Unknown	Total	Intermediate	Not known	1	Numl 2	oer of		ooms Unknown	Tota
Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type		ĺ					I
	Te	otals	(a + b	+ C +	d + e	+ f + g) =			T	otals	(a + t) + C +	d + e	+ f + g) =	
Key worker	Not		Numb				Total	Key worker	Not		Numl				Tota
Houses	known	1	2	3	4+	Unknown		Houses	known	1	2	3	4+	Unknown	<u> </u>
Flats and maisonettes						<u> </u>		Flats and maisonettes				_			
Live-work units								Live-work units			-				
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing						-	
Bedsit/studios							\vdash	Bedsit/studios							
Unknown type								<u> </u>							
OTIMIOWIT LYPE		otals	(a + b	+ C +	d + e	+ f + g) =	1	Unknown type		l otals	(a + h) + C +	d + e	+ f + g) =	
Total proposed r						+ D) =	4	Total existing							0
Tara Proposer				1, , ,	0	. 2/ -		Total existing	· valuel	ul (a. 1113	12.7	1 T C	, , , , , _	

18. All	Types of D	18. All Types of Development: Non-residential Floorspace								
				in or change of u		<u> </u>	VE I	No		
If you	u have answe	ered Yes to th	ne que	estion above plea	se add details	in the follow	ing table:			
Us	Use class/type of use			Existing gross internal floorspace (square metres)	Gross internal to be lost by use or der (square n	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)		
A1	She	ops								
	Net trada	able area:								
A2	Financ profession	ial and al services								
А3	Restaurant	s and cafes								
A4	Drinking est	ablishments								
A 5	Hot food	takeaways								
B1 (a)		er than A2)								
B1 (b)		ch and pment								
B1 (c)		dustrial								
B2	General i	ndustrial								
B8		distribution								
C1	Hotels ar	d halls of ence								
C2	1	institutions								
D1		idential utions								
D2	Assembly	and leisure								
OTHER										
Please Specify										
	То	tal								
In add	dition, for ho	tels, resident	tial ins	stitutions and hos	stels, please ad	ditionally inc	dicate the loss or gain of	frooms		
Use class	Type of use	Not applicable	Existi	ng rooms to be l of use or demo	ost by change olition	Total room ch	is proposed (including langes of use)	Net additional rooms		
C1	Hotels									
	Residential Institutions									
OTHER			\angle							
Please Specify										
19. Em	ployment									
Please co	omplete the f	ollowing inf	ormat	ion regarding en	nployees:					
				Full-time	Part	-time	10	tal full-time equivalent		
Existing employees /										
Proj	Proposed employees /									
20. Hou	urs of Ope	ning	,	Ċ						
If known	•			ning (e.g. 15:30) f	· · · · · · · · · · · · · · · · · · ·		proposed: Sunday and			
	Use	- M	onday	to Friday	Saturda	У	Bank Holidays	Not known		
								\		
	· · · · · · · · · · · · · · · · · · ·									
21 Site										

Please state the site area in hectares (ha)

22. Industrial or Commercial Proce	esses and Machine	ry		
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed or	icts including include the	N/A		
Is the proposal a waste management develo	ppment? Yes	No		
If the answer is Yes, please complete the foll	lowing table:			
	हुं including engin ∈ allowance for o	city of the void in cubic n eering surcharge and ma cover or restoration mate I waste or litres if liquid w	king no throughput in	tonnes
Inert landfill		,		
Non-hazardous landfill				
Hazardous landfill				
Energy from waste incineration				
Other incineration				
Landfill gas generation plant				
Pyrolysis/gasification				
Metal recycling site		···/		
Transfer stations				
Material recovery/recycling facilities (MRFs)				
Household civic amenity sites				
Open windrow composting				···-·
In-vessel composting				
Anaerobic digestion				
Any combined mechanical, biological and or thermal treatment (MBT)				
Sewage treatment works				
Other treatment				
Recycling facilities construction, demolition and excavation waste				
Storage of waste				
Other waste management				
Other developments				
Please provide the maximum annual operat	ional throughput of the	e following waste streams	5: /	
Municipal		/		
Construction, demolition and e	excavation		·	
Commercial and indust	rial			
Hazardous				
If this is a landfill application you will need t planning authority should make clear what	o provide further inforr information it requires	nation before your applic on its website.	cation can be determined. Your	waste
23. Hazardous Substances	·			
Does the proposal involve the use or storage the following materials in the quantities state		□No □ No	ot applicable	
If Yes, please provide the amount of each su			/	,
Acrylonitrile (tonnes)	Ethylene oxide (to		Phosgene (tonnes)	
Ammonia (tonnes)	Hydrogen cyanide (to			
Bromine (tonnes)	Liquid oxygen (to		Flour (tonnes)	
	quid petroleum gas (to	<u> </u>	Refined white sugar (tonnes)	
Other:		Other:		
Amount (tonnes):		Amount (tonnes):		
ALTIOUTICION I/		WHICH IT IT IT IT IS IT.	/	

24. Ownership Certificates and Agricultural Land Declaration

One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A

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* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding**

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

** "agricultural holding" has the meaning	ist or leasenoid interest with at least / years left to run. given by reference to the definition of "agricultural tenant" in section 65(8) of t	he Act.
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
I certify/ The applicant certifies that I ha 21 days before the date of this application application relates. * "owner" is a person with a freehold interest	CERTIFICATE OF OWNERSHIP - CERTIFICATE B velopment Management Procedure) (England) Order 2015 Certificate ve/the applicant has given the requisite notice to everyone else (as listed on, was the owner* and/or agricultural tenant** of any part of the land o est or leasehold interest with at least 7 years left to run. viven in section 65(8) of the Town and Country Planning Act 1990	below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
MR C. A. MARTIN	17, PLEET ROAD, CANDEN, LONDON NW3 ZOR	05/02/2016
MRJ-M. BUCKLAND	17, FLEST ROAD, CAMDEN, LONDON, NW3 ZQP	05/02/2016
MR. W. CHAMPION	17, FLEET ROAD, CAMDEN, LONDON 2027	05/02/2016
MR G.R. BERRYMAN	17, FLEET ROAD, CANDEN, LONDON NW3 202P	05/02/2016
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
	QCOatts	05/02/2016

Town and Country Planning (De I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been the land or building, or of a part "owner" is a person with a freehold interes "agricultural tenant" has the meaning go The steps taken were:	CERTIFICAT evelopment Mar issued for this a taken to find out of it, but I have/ est or leasehold in	TE OF OWNERSH nagement Proces pplication the names and a the applicant has terest with at leas	IP - CERTIF dure) (Eng ddresses of s been unal t 7 years left	FICATE C land) Order 2015 Certificate f the other owners* and/or ble to do so.	
			Address /		
Name of Owner / Agricultural Tenant	Date Notice Served				
		/			
	- /				
Notice of the application has been publi (circulating in the area where the land is	shed in the following situated):	wing newspaper		On the following date (whether the days before	nich must not be earlier late of the application):
Signed - Applicant:		Or signed - Age	nt:		Date (DD/MM/YYYY):
	CEDTIFICAT	E OF OWNERSHI	D. CERTIE	ACATE D	
Town and Country Planning (Det I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the have/ the applicant has been una "owner" is a person with a freehold interest "agricultural tenant" has the meaning gi The steps taken were:	velopment Man r this application aken to find out it owner* and/or a able to do so. st or leasehold into	agement Proced the names and ad agricultural tenan erest with at least	dure) (Engle ddresses of t** of any p	everyone else who, on the part of the land to which the torun.	day 21 days before the
Notice of the application has been publis (circulating in the area where the land is	shed in the follov situated):	ving newspaper		On the following date (which was the following date)	nich must not be earlier late of the application):
Signed - Applicant:		Or signed - Agei	nt:		Date (DD/MM/YYYY):
25. Planning Application Requi	romonts - Ch	acklist			
Please read the following checklist to ma information required will result in your a the Local Planning Authority has been su	ike sure you have	e sent all the info	mation in s It will not b	support of your proposal. I be considered valid until al	Failure to submit all I information required by
The original and 3 copies of a completed application form:		T A	he correct	fee:	
The original and 3 copies of the plan whi the land to which the application relates identified scale and showing the directio	drawn to an	i	f required (l and 3 copies of a design a see help text and guidance I and 3 copies of the compl	e notes for details):
The original and 3 copies of other plans a information necessary to describe the su		/ a	Ownership (Certificate (A, B, C or D – as 14 Certificate (Agricultural	applicable)

26. 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 the genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): (date cannot be 2016 pre-application) 27. Applicant Contact Details 28. Agent Contact Details Telephone numbers Telephone numbers Éxtension Extension Country code: Country code: National number: number: National number: number: 01707 375804 +44 Country code: Mobile number (optional): Country code: Mobile number (optional): 07917 567994 +11 Fax number (optional): Country code: Country code: Fax number (optional): Email address (optional): Email address (optional): maxeplanning estinternet. com 29. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land? No If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Other (if different from the

If Other has been selected, please provide:

Contact name:

Email address:

Agent

Telephone number:

Applicant

agent/applicant's details)