

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 approval of details reserved by condition. 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 N	ame, Address and Contact Details							
Title: Mr	First name: Peter	Surname: Smith						
Company name								
Street address:	45		Country Code	National Number	Extension Number			
	Platt's Lane	Telephone number:						
		Mobile number:						
Town/City	London	Fax number:						
County:	Camden							
Country:	United Kingdom	Email address:						
Postcode:	NW3 7NL							
Are you an agent a	acting on behalf of the applicant?	○ No						
2. Agent Name	e, Address and Contact Details							
Title: Mr	First Name: Sebastian	Surname: Sandler						
Company name:	Xul Architecture							
Street address:	33 Belsize Lane		Country Code	National Number	Extension Number			
		Telephone number:						
		Mobile number:						
Town/City	London	Fax number:						
County:								
Country:	United Kingdom Email address:							
Postcode:	NW3 5AS	s.sandler@xularchitectu	ure.co.uk					

3. Site Address	Details									
Full postal address	of the site (incl	uding full postcode	where available)		Description:					
House:	45	Suff	ix:							
House name:										
Street address:	Platt's Lane									
Town/City:	London									
County:	Camden									
Postcode:	NW3 7NL									
Description of locat	ion or a grid re	ference								
(must be completed										
Easting: 525273										
Northing:	18614	12								
4. Pre-applicat	ion Advice					_				
Has assistance or pr	ior advice beer	n sought from the l	ocal authority abou	ut this application	n?	• Yes	No			
If Yes, please comp	lete the followi	ng information abo	out the advice you	were given (this \	will help the author	ity to deal with this a	pplication more eff	iciently):		
Officer name:										
Title: Ms	First nam	ne: Tania			Surname:	Skelli-Yaoz				
Reference:	-									
Date (DD/MM/YYYY	): 08/03/2	2016 (M	/lust be pre-applica	ition submission)	)					
Details of the pre-a	oplication advi	ce received:								
			happy with the inf	ormation provide	ed but would requi	re a formal submissio	n through the plan	ning portal.		
5. Description of	of Proposal									
•	•									
Please provide a de	•	•••								
Excavation of single			ition of external firs	st floor front was	te pipe.					
Application reference		2015/1718/P					Date of decision	on: 03/08/2015		
Please state the cor		r(s) to which this ap	plication relates:							
Condition number(	5):									
Has the developme	nt already star	ted?	Yes 💿 No							
6. Discharge of	Condition(	(s)								
Please provide a ful	l description ar	nd/or list of the ma	terials/details that a	are being submit	ted for approval:					
								he critical elements of		
						and approved in wri		cked and approved by a anning authority.		
7. Part Discharg	ne of Condi	tion(s)								
	ge of contai	(1011(3)								
Are you seeking to	discharge only	part of a condition	? ()	Yes 💿 No	)					
8. Site Visit										
0. Site visit										
Can the site be seer	n from a public	road, public footpa	ath, bridleway or ot	her public land?		Yes O 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	○ The a	pplicant O	Other person							
9. Declaration										
I/we hereby apply for										
additional informati opinions given are t				ige, any facts stat	ieu are irue and acc	curate and any	Date	08/03/2016		