

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: Mrs	First name: Naomi	Surname:							
Company name	Gordon								
Street address:	21		Country Code	National Number	Extension Number				
	Kidderpore Gardens	Telephone number:							
		Mobile number:							
Town/City	London	Fax number:							
County:	Camden	rax number.							
Country:	United Kingdom	Email address:							
Postcode:	NW3 7SS								
Are you an agent acting on behalf of the applicant? Yes No									
2. Agent Name	e, Address and Contact Details								
Title: Mr	First Name: Geoffrey	Surname: Pren	ntice						
Company name:	5d Architects Ltd								
Street address:	764 Finchley Road			National Number	Extension Number				
		Telephone number:		020 8458 4326					
		Mobile number:		07721 598207					
Town/City		Fax number:							
County:	London	Tax number.							
Country:	United Kingdom Email address:								
Postcode:	764 Finchley Road, Te	geoff@5darchitects.org.uk							

3. Site Address								
Full postal address		uding full postcode where	e available	e) 	Description:			
House:	21	Suffix:						
House name:								
Street address:	Kidderpore Ga	ardens						
Town/City:	London	London						
County:	Camden							
Postcode:	NW3 7SS							
Description of local								
Easting:	52551	4						
Northing:	18588	6						
A Dro applicati	tion Adviso							
4. Pre-applicate Has assistance or re-		n sought from the local au	ıthority ah	oout this annlicati	nn?	Yes •	No	
		1 33 agrit it offi tile local at	attroffty dt	жи илэ аррисан	o	0 163	140	
5. Description	of Proposal							
Please provide a de	escription of the	approved development	as shown (on the decision le	tter:			
lightwell) and erec Drawing Nos: Site	tion of single-st location plan; Ba	ightwells to the front electorey glazed rear ground fisement Impact Assessment 18.05; 06.918.06; 06.9	loor level e ent, prepar	extension all in co	nnection with existing re	esidential dwelling	(Class C3).	
Application referer		2013/0149/P	•				Date of decision:	21/06/2013
	endition number	(s) to which this applicati	on relates:	:				
suitably qualified of professional body elements of both p throughout their d checked and appro- the appointee's res Council prior to the	chartered engine has been appoin permanent and t luration to ensu- poved by a building sponsibilities shad e commenceme all be confirmed	red shall not commence user with membership of the ted to inspect, approve a semporary basement conce compliance with the dang control body. Details all be submitted to and and of development. Any storthwith for the durationed? Yes	he appropend monite struction vesign which the apporture in the apporture in the subsequen	riate or the critical works th has been bintment and n writing by the at change or				
6. Discharge o	f Condition(s)						
Please provide a fu	ıll description ar	nd/or list of the materials/	details tha	at are being subm	itted for approval:			
· ·	•	MIStruct E - Vincent & Ryn			· · · · · · · · · · · · · · · · · · ·			
7. Part Dischar	rge of Condi	tion(s)						
Are you seeking to	discharge only	part of a condition?	(Yes • 1	lo			
8. Site Visit								
Can the site be see	en from a public	road, public footpath, bri	dleway or	other public land	? (Yes No		
If the planning aut	hority needs to	make an appointment to	carry out a	a site visit, whom	should they contact? (Pl	lease select only on	e)	
The agent	○ The a	pplicant Other	person					
9. Declaration								
additional information	tion. I/we confir	mission/consent as descr m that, to the best of my/ inions of the person(s) giv	our knowl	ledge, any facts st			∑ Date 15/0	03/2016