

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

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 Name, Address and Contact Details								
Title: Mr	First Name:	Amir		Surname:	Nooriala			
Company name:								
Street address:	56, Howitt Road							
			Telephone numb	er:				
			Mobile number:					
Town/City:	LONDON		Fax number:					
Country:			Email address:					
Postcode:	NW3 4LJ							
Are you an agent	acting on behalf of the	ne applicant?	Yes	lo				
2. Agent Name	, Address and C	Contact Details						
	_			_				
Title: Mr	First Name:	Graham		Surname:	Ford			
Company name:	Graham Ford Arch	itects						
Street address:	Britannia House							
	11 Glenthorne Roa	ıd	Telephone numb	oer: 0208	7482024			
			Mobile number:					
Town/City:	LONDON		Fax number:					
Country:			Email address:					
Postcode:	W6 0LH		graham@grahamfordarchitects.com					

3. Site Addre	ss Details		
Full postal addre	ess of the site (including full postcode where available	e) Description:	
House:	56 Suffix:		
House name:			
Street address:	Howitt Road		
Town/City:	LONDON		
Postcode:	NW3 4LJ		
	ocation or a grid reference eted if postcode is not known):		
Easting:	527252		
Northing:	184893		
4. Pre-applica	ation Advice		
Has assistance	or prior advice been sought from the local authority at	bout this application?	○ Yes No
5 December 1	of the Present		
5. Description	n of the Proposal		
Please provide a	a description of the approved development as shown	on the decision letter:	
			lights at garden level, loft conversion with 3 rear and 1 indow to existing rear extension at ground floor level of
Application refer	ence number: 2013/6138/P		Date of decision: 03/12/2013
Please state the Condition number	condition number(s) to which this application relates: er(s):		
Condition Numb	per 4		
Has the develop	ment already started? Yes No		
6. Discharge	of Condition(s)		
•	. ,		
Please provide a	a full description and/or list of the materials/details tha	it are being submitted for app	oroval:
Arboricultural In	npact Assessment lethod Statement		
7. Part Discha	arge of Condition(s)		
Are you seeking	to discharge only part of a condition?		
8. Site Visit			
Can the site be s	seen from a public road, public footpath, bridleway or	other public land?	Yes No
	uthority needs to make an appointment to carry out a	•	contact? (Please select only one)

8. Site Visit				
The agent	The applicant	Other person		
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 the genuine opinions of the person(s) giving them.

 \checkmark

Date

04/04/2016