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Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

Application for listed building consent for alterations, extension or demolition of a listed building. Planning (Listed Buildings and Conservation Areas) 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.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

| Title: MS First name: CHRISTINA  Last name: FREYBERG  Company (optional):  Unit: House number: I9 House suffix: House number:  House name: Address 1: ELVASTON PLACE  Address 2: Address 3:  Town: LONDON  County: Country:  Postcode: SW7 SQF  3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):  —Block up existing down at ground flow level in entrance hall forming and flow level in entrance hall forming and flow way and fl |                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| Company (optional):  Unit: House number: 19 House suffix: Unit: House number: House number: House name:  Address 1: ELVASTON PLACE  Address 2: Address 3: Address 3: Town: LONDON  County: County: Country: Postcode: SW7 SQF   3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | :                                           |
| (optional):  Unit: House number: [9] House suffix: Unit: House number:  House name: Address 1: ELVASTON PLACE  Address 3: Address 3: Address 3: Town: LONDON  County: Country: Country: Country: Postcode: SW7 SQF  3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                             |
| Onit: number: I'I suffix: Unit: number: House name: Address 1: ELVASTON PLACE  Address 2: Address 3: Address 3: Town: LONDON  County: County: County: County: Postcode: SW7 SQF   3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                             |
| name: Address 1: ELVASTDN PLACE Address 2: Address 3: Town: LONDON  County: County: Postcode: SW7 SQF   3. Description of Proposed Work Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | House<br>suffix:                            |
| Address 2:  Address 3:  Town: LONDON  County:  Country:  Postcode: SW7 SQF  Address 3:  Town:  Country:  Postcode: SW7 SQF   Address 2:  Address 3:  Town:  Country:  Postcode:  Postcode:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                             |
| Address 3:  Town: LONDON  County:  Country:  Postcode: SW7 SQF  Address 3:  Town:  County:  County:  Postcode:  Postcode:  3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                             |
| Town: LONDON Town:  County: County: County: County:  Postcode: SW7 SQF  3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                             |
| County:  County:  County:  County:  County:  County:  County:  Postcode:  Postcode:  3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                             |
| Country:  Postcode: SW7 SQF  Postcode:  Postcode:  Postcode:  Postcode:  Postcode:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                             |
| Postcode: SW7 SQF  Postcode: Postcod |                                             |
| 3. Description of Proposed Work  Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                             |
| Please describe the proposals to alter, extend or demolish the listed building(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                             |
| - Block up existing above at ground plot level in entrance hall frommy a create down at ground flow level in entrance hall frommy a Block up existing above to bathroom and form now dooming in - Create new NC bonder stews and bring in services and other - Create shower room in 2nd bedroom - Create shower room in 2nd bedroom - Upgrade samtaing wave, more sink and add sharer to create page and extend single story rear extension - Replace and extend single story rear extension                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | lowway)<br>corrector<br>age<br>z a wet voom |

| 3. Description of Proposed Work (continued)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4. Site Address Details                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| And the second s | Please provide the full postal address of the application site.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Has the work already started without consent?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Unit: House number: 12 House suffix:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| If Yes, please state when the work was started (DD/MM/YYYY):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | name: Address 1: LEVERTON STREET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Address 2:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Address 3:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| (date must be pre-application submission)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Town: LDNDON                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| Has the work been completed without consent? Yes No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Postcode NWS ZPI                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| completed without consents                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Description of location or a grid reference.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| If Yes, please state the date when the work was completed (DD/MM/YYYY):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | (must be completed if postcode is not known):  Easting: Northing:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Description:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| (date must be pre-application submission)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 5. Related Proposals                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 6. Pre-application Advice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Are there any current applications, previous proposals or demolitions for the site?  If Yes please describe and include the planning application reference number(s), if known:  Description  Reference number  Replace and extend single-story PP- New extension  Research of the site?  No  Reference number  Research of the site?  No  Reference number  Research of the site?  No  Reference number  Replace and extend single-story PP-  New extension                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Has assistance or prior advice been sought from the local authority about this application?  If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).  Please tick if the full contact details are not known, and then complete as much as possible:  Officer name:  DARLENE DIKE, PLANNING TECHNICIAN  Reference:  Date (DD/MMYYYY):  (must be pre-application submission)  Details of pre-application advice received?  DISCUSSED MED MED MED MED MED MED MED MED MED M |
| 7. Neighbour and Community Consultation  Have you consulted your neighbours or the local community about the proposal?  If Yes, please provide details:  Sent a letter informing them of proposed works                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member If Yes, please provide details of the name, relationship and role                                                                                                                                                                                                                                                                                                                                |

\$Delta: 2014-02-10 #\$ \$Revision: 5975 \$

|                                                                         | Existing (where applicable)      | Proposed                                                                                                                                              | Not<br>applicable | Don't<br>Know |
|-------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------|
| External walls                                                          | Fawface brock                    | Timber and glass conservations roof - timber to be spirited                                                                                           |                   |               |
| Roof covering                                                           | Flat felt vool                   |                                                                                                                                                       |                   |               |
| Chimney                                                                 |                                  | _                                                                                                                                                     | 9                 |               |
| Windows                                                                 | Painted timber framed<br>windows | Hard wood timber framed<br>full height fully glazed<br>hundars - to be painted                                                                        |                   |               |
| External doors                                                          | Painted timber framed windows    | Hand wood timber framed<br>full height fully glazed<br>French doors - to be painted                                                                   |                   |               |
| Ceilings                                                                |                                  | _                                                                                                                                                     |                   |               |
| Internal walls                                                          |                                  | /                                                                                                                                                     | 0                 |               |
| Floors                                                                  |                                  | _                                                                                                                                                     |                   |               |
| Internal doors                                                          | /                                | Create new door to ground floor wic                                                                                                                   |                   |               |
| Rainwater goods                                                         |                                  | Updating existing                                                                                                                                     |                   |               |
| Boundary treatments<br>(e.g. fences, walls)                             | _                                | -                                                                                                                                                     |                   |               |
| Vehicle access and<br>hard standing                                     | _                                |                                                                                                                                                       |                   |               |
| Lighting                                                                |                                  | Updating existing                                                                                                                                     |                   |               |
| Others<br>(add description)                                             |                                  |                                                                                                                                                       |                   |               |
| FYes, please state plan<br>LEV - 004G GW<br>LEV 005D IN<br>LEV 006A Pre | -and Albac Floors as Proposed LE | Dians? Yes No  EV-009 Elevation of new down in Jua  EV-010 Understown WC, I-ID  EV-011 Rear Elevation as Proposes  Levovitan Street SK18, SK2 + calc: | d                 |               |

| 10. Demolition                                                                                                                                                                                                                                 | 11. Listed Building Alterations                                                                                                                                                                                                                                                                                          |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Does the proposal include the partial or total demolition of a listed building?                                                                                                                                                                | Do the proposed works include alterations to a listed building?                                                                                                                                                                                                                                                          |  |  |  |
| If Yes, which of the following does the proposal involve?                                                                                                                                                                                      | If Yes, do the proposed works include:                                                                                                                                                                                                                                                                                   |  |  |  |
| a) Total demolition of the listed building: Yes No                                                                                                                                                                                             | (you must answer each of the questions)                                                                                                                                                                                                                                                                                  |  |  |  |
| b) Demolition of a building within the curtilage of the listed building: Yes No                                                                                                                                                                | a) Works to the interior of the building?                                                                                                                                                                                                                                                                                |  |  |  |
| c) Demolition of a part of the listed building: Yes No                                                                                                                                                                                         | b) Works to the exterior of the building?                                                                                                                                                                                                                                                                                |  |  |  |
| If the answer to c) is Yes:                                                                                                                                                                                                                    | c) Works to any structure or object fixed<br>to the property (or buildings within                                                                                                                                                                                                                                        |  |  |  |
| i) What is the total volume of the<br>listed building?(cubic metres)                                                                                                                                                                           | its curtilage) internally or externally? Yes VNo                                                                                                                                                                                                                                                                         |  |  |  |
| ii) What is the volume of the part<br>to be demolished?(cubic metres)                                                                                                                                                                          | d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No                                                                                                                                                                                                                     |  |  |  |
| iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)  Please provide a brief description of the building or part of the building you are proposing to demolish: | If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s): |  |  |  |
| Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?                                                                                                                                  | LEV-004G Grand Flow as Proposed LEV-005D 1st and Rebic Flow as Proposed LEV-006A Proposed Section LEV-006C Proposed Rear Elevation LEV-008 Braning Room Door Detail LEV-009 Elevation of new door in Drawing LEV-010 Understaw HC.1-10 Room LEV-011 Rear Elevation as Proposed 12 Leverton Street SKIB, SK2 + cale sheet |  |  |  |
| 12. Listed Building Grading                                                                                                                                                                                                                    | 13. Immunity From Listing                                                                                                                                                                                                                                                                                                |  |  |  |
| Please state the grading (if known) of the building in the list of<br>Buildings of Special Architectural or Historic interest? (Note: only<br>one box must be ticked)                                                                          | Has a Certificate of Immunity from Listing been sought in respect of this building?                                                                                                                                                                                                                                      |  |  |  |
| Grade I Ecclesiastical Grade I                                                                                                                                                                                                                 | Yes VNo Don't know  If Yes, please provide the result of the application:                                                                                                                                                                                                                                                |  |  |  |
| Grade II* Ecclesiastical Grade II*                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                          |  |  |  |
| Grade II Ecclesiastical Grade II                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                          |  |  |  |
| Don't know 🗌                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                          |  |  |  |
| l J                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                          |  |  |  |

## 14. Ownership Certificates One Certificate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 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. \* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): 18/05/2016 CERTIFICATE OF OWNERSHIP - CERTIFICATE B Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner\* of any part of the land or building to which this application relates. \*"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. Name of Owner Date Notice Served Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY): CERTIFICATE OF OWNERSHIP - CERTIFICATE C Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners\* of the land or building, or of a part of it, but I have/ the applicant has been unable to do so. \* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. The steps taken were: Name of Owner Address Date Notice Served Notice of the application has been published in the following newspaper (circulating in the area where the land is situated): On the following date (which must not be earlier than 21 days before the date of the application): Signed - Applicant: Or signed - Agent: Date DD/MM/YYYY):

SDate: 2014-02-10 #5 SRevision: 5975 5.

| 14. Ownership Certificates (continued)                                                                                                                                                                      |                 |                    |                                                                  |                           |  |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|--------------------|------------------------------------------------------------------|---------------------------|--|--|
| CERTIFICATE OF OWNERSHIP - CERTIFICATE D                                                                                                                                                                    |                 |                    |                                                                  |                           |  |  |
| Regulation 6 of the Planning (Listed Buildings and Conservation Areas) Regulations 1990 I certify/ The applicant certifies that:                                                                            |                 |                    |                                                                  |                           |  |  |
| Certificate A cannot be issued for this application                                                                                                                                                         |                 |                    |                                                                  |                           |  |  |
| <ul> <li>All reasonable steps have been taken to find ou<br/>date of this application, was the owner* of any</li> </ul>                                                                                     |                 |                    |                                                                  |                           |  |  |
| unable to do so.                                                                                                                                                                                            |                 |                    |                                                                  | the applicant has been    |  |  |
| * "owner" is a person with a freehold interest or leasehold in                                                                                                                                              | nterest with at | least 7 years left | to run.                                                          |                           |  |  |
| The steps taken were:                                                                                                                                                                                       |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
| Notice of the application has been published in the folk<br>(circulating in the area where the land is situated):                                                                                           | owing newspa    | per                | On the following date (which than 21 days before the date        |                           |  |  |
| Signed - Applicant:                                                                                                                                                                                         | Or signed -     | Agent:             |                                                                  | Date DD/MM/YYYY):         |  |  |
| Typneare Typneare                                                                                                                                                                                           | 7               | rigeria            |                                                                  | Duce Obstanto 1111).      |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  | =                         |  |  |
| <ol> <li>Planning Application Requirements - Ch</li> </ol>                                                                                                                                                  |                 |                    |                                                                  |                           |  |  |
| Please read the following checklist to make sure you have<br>information required will result in your application being                                                                                     |                 |                    |                                                                  |                           |  |  |
| the Local Planning Authority has been submitted.                                                                                                                                                            |                 |                    |                                                                  |                           |  |  |
| The original and 3 copies of a completed and dated                                                                                                                                                          |                 |                    | 3 copies of other plans and dr<br>essary to describe the subject |                           |  |  |
| application form:                                                                                                                                                                                           |                 |                    | 3 copies of the completed dat                                    |                           |  |  |
| The original and 3 copies of a plan which identifies the                                                                                                                                                    |                 |                    | ficate (A, B, C, or D - as applica                               |                           |  |  |
| land to which the application relates and drawn to an                                                                                                                                                       |                 |                    | 3 copies of a design and acces                                   |                           |  |  |
| identified scale and showing the direction of North:                                                                                                                                                        |                 | f required (see I  | nelp text and guidance notes for                                 | or details):              |  |  |
| I/we hereby apply for planning permission/consent as d information. I/we confirm that, to the best of my/our kn genuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed - Applicant: |                 |                    |                                                                  | nions given are the       |  |  |
| 17. Applicant Contact Details                                                                                                                                                                               | $\overline{}$   | 10 Agent           | Contact Details                                                  | ==                        |  |  |
|                                                                                                                                                                                                             | - 1             |                    |                                                                  |                           |  |  |
| Telephone numbers                                                                                                                                                                                           | Extension       | Telephone nu       | mbers                                                            | Estancian                 |  |  |
| Country code: National number:                                                                                                                                                                              | number:         | Country code       | : National number:                                               | Extension number:         |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
| Country code: Mobile number (optional):                                                                                                                                                                     |                 | Country code       | : Mobile number (optional):                                      |                           |  |  |
| 07780 705262                                                                                                                                                                                                |                 |                    | one nomber (optional).                                           |                           |  |  |
|                                                                                                                                                                                                             | - 1             | Country and        |                                                                  |                           |  |  |
| Country code: Fax number (optional):                                                                                                                                                                        | - 1             | Country code       | : Fax number (optional):                                         | ———— I                    |  |  |
| Email address (optional):                                                                                                                                                                                   | - 1             | Email address      | (ontional)                                                       |                           |  |  |
| (appendix                                                                                                                                                                                                   |                 |                    | (option)                                                         |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
| <ol> <li>Site Visit</li> <li>Can the site be seen from a public road, public footpath,</li> </ol>                                                                                                           | bridleway or    | other public lar   | nd? Thes No                                                      |                           |  |  |
| If the planning authority needs to make an appointment                                                                                                                                                      | t to carry      | Agent              | Applicant Oth                                                    | er (if different from the |  |  |
| out a site visit, whom should they contact? (Please select<br>If Other has been selected, please provide:                                                                                                   | only one        |                    | age                                                              | nt/applicant's details)   |  |  |
| Contact name:                                                                                                                                                                                               |                 | Telephone nu       | mber:                                                            |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
|                                                                                                                                                                                                             |                 |                    |                                                                  |                           |  |  |
| Email address:                                                                                                                                                                                              |                 |                    |                                                                  |                           |  |  |

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