

Email: planning@camden.gov.uk

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

Application for 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.

1. Applic	ant Name and Address	2. Agent Name and Address
Title:	First name: DUNCAN	Title: First name:
Last name:	CLOUGH	Last name:
Company (optional):	UNIVERSITY OF LONDON	(optional): ATP ARCHITECTS + SURVEYORS
Unit:	House House suffix:	Unit: House number: House suffix:
House name:	SENATE HOUSE	House name: BROOK HOUSE
Address 1:	MALET STREET	Address 1: COVENTRY ROAD
Address 2:		Address 2:
Address 3:		Address 3:
Town:	LONDON	Town: ILFORO
County:		county: ESSEX
Country:	ENGLAND	Country: ENGLAND
Postcode:	WCIE 7HU	Postcode: ICn1 4Q2
3. Descri	ption of Proposed Work	
Please desc	ribe the proposals to alter, extend or demolish the listed	l building(s):
-CF	leation of under stairs	SHOWER ROOM
0 -		
-KE	ARRANGEMENT OF EXIS	STING BATHROOM.
		\$Date: 2014-02-10 #\$ \$Revision: 59/5 \$

Description of Proposed Work (continued)	4. Site Address Details
•	Please provide the full postal address of the application site.
Has the work already	Unit: House House suffix:
started without consent? Yes No	House
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1: 29 TORZINGTON SQUARE
	Address 2:
	Address 3:
(date must be pre-application submission)	Town: LONDON
Has the work been completed without consent?	Postcode LIGC TTI
estriplace without consolit.	(optional): WCIE TJL 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? Yes No	Has assistance or prior advice been sought from the local authority about this application?
If Yes please describe and include the planning application reference number(s), if known:	If Yes, please complete the following information about the advice
Description Reference number	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:
	Reference:
	Date (DD/MM/YYYY): (must be pre-application submission)
	Details of pre-application advice received?
7. Neighbour and Community Consultation	8. Authority Employee / Member With respect to the Authority, I am: Do any of these
Have you consulted your neighbours or the local community about the proposal? Yes No	(a) a member of staff statements apply to you?
If Yes, please provide details:	(b) an elected member Yes \(\sum \backslash \text{No}\)
n res, prease provide details.	(d) related to an elected member
	If Yes, please provide details of the name, relationship and role
	3Date: 2014-02-10 45 SRevision. 59/5 \$

External walls Roof covering Chimney Windows External doors External doors Ceilings Smooth Painted To Match existing Internal walls Smooth Painted To Match existing PlasterBoard on Timper Study Floors Timber FloorsAners. To Match existing Internal doors Timber Floorenares. To Match existing Internal doors Timber Floorenares. To Match existing Internal doors Timber Floorenares. To Match existing Internal doors Rainwater goods	Please provide a descr	ription of existing and proposed materials and fin	ishes to be used in the building (demolition excluding)		
Roof covering Chimney Windows External doors Cellings SMOOTH PAINTED TO MATCH EXISTING Internal walls SMOOTH PAINTED TO MATCH EXISTING PLASTERBOARD ON TIMBER STUB Floors TIMBER FLOORBOARPS. WITH VINYL FINISH Internal doors CALRED PANELED DOOR Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Chimney Wes No	-		Proposed	Not applicable	Don't Know
Chimney Windows External doors Ceilings Smooth Painted To Match existing Internal walls Smooth Painted To Match existing PlasterBoard on Timper Study PlasterBoard on Timper Study Internal doors To Match existing Internal doors Internal doors Internal doors To Match existing Internal doors Internal walls I	External walls			\boxtimes	
External doors External doors Ceilings SMOOTH PAINTED TO MATCH EXISTING Internal walls SMOOTH PAINTED TO MATCH EXISTING PLASTERBOARD ON TIMBER STUDY PLASTERBOARD ON TIMBER STUDY Floors TIMBER FLOORBOARDS. WITH JINYL FINISH TO MATCH EXISTING INTERNATION INTERNATION Internal doors CALAZED PANELED DOOR Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No	Roof covering			M	
External doors Ceilings SMOOTH PAINTED TO MATCH EXISTING Internal walls SMOOTH PAINTED TO MATCH EXISTING PLASTERBARD ON TIMBER STUD Internal doors TIMBER FLOORBOARDS. WITH UNYL FINISH Internal doors CALRED PANELED DOOR Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes \ No	Chimney			×	
Cellings SMOOTH PAINTED TO MATCH EXISTING PLASTERBARD ON TIMBER STUD Floors TIMBER FLOOREDARDS. WITH VINYL FINISH Internal doors -GLAZED PANELED DOOR Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes \ No	Windows			×	
Ceilings Internal walls SMOOTH PAINTED TO MATCH EXISTINGS PLASTERBOARD ON TIMBER STUDY PLASTERBOARD ON TIMBER STUDY Internal doors CALAZED PANELED TO MATCH EXISTINGS Internal doors CALAZED PANELED DOOR Internal doors CALAZED PANELED	External doors				
Floors TIMBER FLOOREDARDS. WITH VINYL FINISH Internal doors CALNED PANELED Door Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? To MATCH EXISTING PLASTERBOARD ON TIMBER STUDY TO MATCH EXISTING NATCH EXISTING IN INDER STUDY ANATCH EXISTING IN INDER STUDY TO MATCH EXISTING IN INDER STUDY ANATCH EXISTING IN INDER STUDY TO MATCH EXISTING IN IN INSTITUTE TO MATCH EXISTING	Ceilings	SMOOTH PANTED	TO MATCH EXISTING		
Floors TIMBER FLOORBOARDS. WITH VINYL FINISH TO MATCH EXISTING Internal doors GLAZED PANELED DOOR Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? To MATCH EXISTING NATCH EXISTING I SUITH VINYL FINISH TO MATCH EXISTING I SUITH VINYL FINISH I SUITH VINYL FINISH TO MATCH EXISTING I SUITH VINYL FINISH I SUITH VINYL FINISH AT SUITH VINYL FINISH TO MATCH EXISTING I SUITH VINYL FINISH I SUIT	Internal walls	SMOOTH PAINTED			
Internal doors Door Rainwater goods Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No	Floors				
Boundary treatments (e.g. fences, walls) Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No	Internal doors				
Vehicle access and hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No	Rainwater goods			\boxtimes	
hard standing Lighting Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No				×	
Others (add description) Are you supplying additional information on submitted drawings or plans? Yes No					
(add description) Are you supplying additional information on submitted drawings or plans? Yes No	Lighting				
				Ø	
1. 1-1 L1-1-1-1 L1-1-1-1-1 L1-1-1-1-1 L1-1-1-1-			ans? Yes No		
- 16181_001					

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building? Yes No	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: (you must answer each of the questions)
a) Total demolition of the listed building: Yes No	2 a constant to the same to 1 constant to the same to 1 constant to 1 co
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 Yo	b) Works to the exterior of the building? Yes No
If the answer to c) is Yes: i) What is the total volume of the	c) Works to any structure or object fixed to the property (or buildings within its curtilage) internally or externally?
listed building?(cubic metres)	its curtilage) internally or externally:
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?
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):
N.B. SINGLE WALL TO BE	-16181_001
REMOVED.	
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	
TO ALLOW THE CREATION	
of A NEW SHOWER GOOM.	
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of	Has a Certificate of immunity from Listing been sought in respect of
Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	this building?
	Yes No Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know	

14. Ownership Certificates								_	
	ficate A, B, C, or D	. must be	complete	d with	n this appli	catio	on form		
	CERTIFICATE					0411	011101111		
Regulation 6 of th I certify/ The applicant certifies that on the owner* of any part of the land or building	ne day 21 days bef	ore the date	of this ap	nserva oplica	ation Area tion nobod	y exe	gulations 199 cept myself/ th)0 ie a	pplicant was the
"owner" is a person with a freehold intere	st or leasehold into	rest with at	least 7 yea	rs left	to run.				
Signed - Applicant:		Ossianod -							ate DD/MM/YYYY):
			(ATP	ARC	HITECTS	+	SURVEYORS		04/07/2016
	CERTIF	5	RSHIP - CI	EDTIE	ICATE R	_			
Regulation 6 of th I certify/ The applicant certifies that I hav 21 days before the date of this applic ""owner" is a person with a freehold intere	ne Planning (Liste ve/the applicant he vation, was the or	d Building as given th wner* of a	s and Con e requisite ny part o	serva e noti f the	ation Areas ce to every land or be	one	else (as listed b	bel	ow) who, on the day application relates.
Name of Owner			Addre	SS:					Date Notice Served
			2000						3 305 0
•									
	=								
								L	
Signed - Applicant:		Or signed -	Agent:					[Date DD/MM/YYYY):
				-] [
Regulation 6 of th	CERTIFICATE ne Planning (Liste					s) Re	gulations 199	} 0	
 Certify/ The applicant certifies that: Neither Certificate A or B can be 	issued for this app	olication							
 All reasonable steps have been to part of it, but I have/ the applica 			nd addres	ses o	f the other	οWΠ	ers* of the land	d o	r building, or of a
* "owner" is a person with a freehold intere	est or leasehold inte	rest with at	least 7 yea	ars left	to run.				
The steps taken were:								_	
Name of Owner			Addre	ess				I	Date Notice Served
								\vdash	
								L	
								\vdash	
_									
Notice of the application has been publi (circulating in the area where the land is	ished in the follow	ing newsp	aper		On the fo	llowi	ing date (which	n n	nust not be earlier f the application):
tar taring in the group who is falle to		*****			1.001210	J - S - L		. 01	applications.
Signed - Applicant:		Or signed	- Agent:					_	Date DD/MM/YYYY):
								7	
								J١	

\$Date: 2014-02-10 (5 \$Revision: 5975 \$

14. Ownership Certificates (continued) CERTIFICA			- 1
	TE OF OWNERSHIP - CERT	IFICATE D	
Regulation 6 of the Planning (Lis			
I certify/ The applicant certifies that: Certificate A cannot be issued for this application			
All reasonable steps have been taken to find out date of this application, was the owner, of any of	t the names and addresses	of everyone else who, on the day 21 days before the s application relates, but I have/ the applicant has be	0.5
unable to do so.		**	en i
" "owner" is a person with a freehold interest or leasehold in	nterest with at least 7 years le	ft to run.	
The steps taken were:			l
			Ш
			Ш
			_
Notice of the application has been published in the follo	owing newspaper	On the following date (which must not be earlier	
(circulating in the area where the land is situated):		than 21 days before the date of the application):	l
			_][
Signed - Applicant:	Or signed - Agent:	Date DD/MM/YYYY)):_
] [ال
15. Planning Application Requirements - Ch	ecklist		
Please read the following checklist to make sure you hav	e sent all the information in		
information required will result in your application being	g deemed invalid. It will not	be considered valid until all information required by	у
the Local Planning Authority has been submitted.		nd 3 copies of other plans and drawings or	J-I
The original and 3 copies of a completed and dated application form:		ecessary to describe the subject of the application:	ا ۲
The original and 3 copies of a plan which Identifies the	— me ongmarar	nd 3 copies of the completed dated rtificate (A, B, C, or D - as applicable):	7
I land to which the application relates and drawn to an	The original ar	nd 3 copies of a design and access statement.	,
identified scale and showing the direction of North:	if required (see	e help text and guidance notes for details):	3
16. Declaration			_
	accelled in this force and th		
I/we hereby apply for planning permission/consent as de	escribed in this form and th	e accompanying plans/drawings and additional	
information. I/we confirm that, to the best of my/our kno	owledge, any facts stated ar	e accompanying plans/drawings and additional e true and accurate and any opinions given are the	
information. I/we confirm that, to the best of my/our kno genuine opinions of the person(s) giving them.	owledge, any facts stated ar ned - Agent:	e accompanying plans/drawings and additional e true and accurate and any opinions given are the Date (DD/MM/YYYY):	
information. I/we confirm that, to the best of my/our kno genuine opinions of the person(s) giving them.	owledge, any facts stated ar ned - Agent:	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Cuestore Date (DD/MM/YYYY) (date cannot be	
information. I/we confirm that, to the best of my/our kno genuine opinions of the person(s) giving them.	owledge, any facts stated ar	e true and accurate and any opinions given are the Date (DD/MM/YYYY):	
information. I/we confirm that, to the best of my/our kno genuine opinions of the person(s) giving them. Signed - Applicant: Or sign	owledge, any facts stated ar ned - Agent: (ATP ARCH ITECTS +	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Surveyers) O4 (07/2016 date cannot be pre-application	
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign	owledge, any facts stated and - Agent: (ATP ARCHITECTS +	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyers) O4 (07/2016 date cannot to pre-application t Contact Details	
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers	ned - Agent: (ATP ARCHITECTS + 18. Agen Extension	e true and accurate and any opinions given are the Date (DD/MM/YYYY): SURVEYORS) OG (OF) 2016 (date cannot to pre-application pre-applicati	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign	ned - Agent: (ATP ARCHITECTS + 18. Agen Telephone r	e true and accurate and any opinions given are the Date (DD/MM/YYYY): SURVEYORS) OG (OF) 2016 (date cannot to pre-application pre-applicati	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers	ned - Agent: (ATP ARCHITECTS + 18. Agen Extension	e true and accurate and any opinions given are the Date (DD/MM/YYYY): SURVEYORS) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers Extension	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers	ned - Agent: (ATP ARCHITECTS + 18. Agen Extension	e true and accurate and any opinions given are the Date (DD/MM/YYYY): SURVEYORS) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers Extension	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number:	ned - Agent: (ATP ARCHITECTS + 18. Agen Extension	e true and accurate and any opinions given are the Date (DD/MM/YYYY): SURVEYORS) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers Extension	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number:	ned - Agent: (ATP ARCHITECTS + 18. Agen Extension	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Cueveyes) O4 (07/2016 (date cannot the pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional):	Extension number:	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Cueveyes) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Extension number: Country code	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyer) O4 (O7/2016 (date cannot to pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional):	Extension number: Country code	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Cueveyes) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Extension number: Country code	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyer) O4 (O7/2016 (date cannot to pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional):	Extension number: Country code	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyer) O4 (O7/2016 (date cannot to pre-application) t Contact Details numbers de: National number: Extension number:	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Extension number: Country code Country code Email address	e true and accurate and any opinions given are the Date (DD/MM/YYYY): (date cannot be pre-application that the pre-appl	on) on
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment	Extension number: Extension number: Country cool Email addre	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyers) O4 (07/2016 (date cannot to pre-application) t Contact Details numbers de: National number: Date (DD/MM/YYYY): Extension number: Extension number: de: Fax number (optional): ess (optional):	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select	Extension number: Extension number: Country cool Email addre	e true and accurate and any opinions given are the Date (DD/MM/YYYY): Curveyes) O4 (07/2016 (date cannot be pre-application) t Contact Details numbers de: National number: Extension number: de: Fax number (optional): ess (optional):	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment	Extension number: [Extension number: [Extens	e true and accurate and any opinions given are the Date (DD/MM/YYYY): (date cannot be pre-application to the pre	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select If Other has been selected, please provide:	Extension number: Extension number: Country cool Email addre	e true and accurate and any opinions given are the Date (DD/MM/YYYY): (date cannot be pre-application to the pre	on)
Information. I/we confirm that, to the best of my/our knot genuine opinions of the person(s) giving them. Signed - Applicant: Or sign 17. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath, If the planning authority needs to make an appointment out a site visit, whom should they contact? (Please select If Other has been selected, please provide:	Extension number: [Extension number: [Extens	e true and accurate and any opinions given are the Date (DD/MM/YYYY): (date cannot be pre-application to the pre	on)

SDate: 2014-02-10 43 \$Revision: 59 /5 \$