

Email: planning@camden.gov.uk

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

Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority's planning department.

1. Applicant N	ame, Address and Contact Details	
Title: Mr	First Name: Jasper	Surname: Cuppaidge
Company name:	Camden Town Brewery	
Street address:	55, Wilkin Street Mews	
		Telephone number:
		Mobile number:
Town/City:	LONDON	Fax number:
Country:		Email address:
Postcode:	NW5 3LN	
Are you an agent	acting on behalf of the applicant?	
2. Agent Name	, Address and Contact Details	
Title: Mr	First Name: Gabriel	Surname: George
Company name:	Michaelis Boyd	
Street address:	108 Palace Gardens Terrace	
		Telephone number: 02072211237
	London	Mobile number:
Town/City:		Fax number:
Country:		Email address:
Postcode:	W8 4RT	gabriel@michaelisboyd.com

3. Site Addres	is Details			
Full postal addre	ss of the site (including full postcode where available) Description:			
House:	55 Suffix:			
House name:				
Street address:	Wilkin Street Mews			
Town/City:	LONDON			
Postcode:	NW5 3LN			
Description of lo	cation or a grid reference			
	eted if postcode is not known):			
Easting:	528577			
Northing:	184740			
4. Pre-applica	tion Advice			
Han andatanan		8 V 0 N	1-	
	or prior advice been sought from the local authority about this application?	Yes N		41
•	mplete the following information about the advice you were given (this will help the	ne authority to dear with this	application more emcient	tiy):
Officer name:	First source Louis			
Title: Ms	First name: Laura St	urname: Hazelton		
Reference:				
Date (DD/MM/Y)	(YYY): 31/08/2016 (Must be pre-application submission) e-application advice received:			
	ubmission of asbestos report for discharge of conditions			
5. Description	n of the Proposal			
	description of the approved development as shown on the decision letter:			
	nd floor rear extension (Class B2). Drawings Nos: 15170-700, 15170-701, 15170 nent, Arboricultural Method Statement Ref CC/1626 AR3061, Design & Access S		Tree Survey, Arboricultur	all
Application refere	ence number: PP-05111357	Date of decision:	03/08/2016	
Please state the Condition number	condition number(s) to which this application relates:			
Condition number				
Has the develop	ment already started? Yes No			
C. Disabanna	of Complision (a)			
6. Discharge	of Condition(s)			
Please provide a	full description and/or list of the materials/details that are being submitted for ap	pproval:		
Asbestos survey	report, pdf file attached			
7. Part Discha	arge of Condition(s)			
Are you seeking	to discharge only part of a condition?	Yes <a> No		
<u> </u>				

8. Site Visit				
Can the site be seen from a public road, public footpath, bridleway or other public land? • Your Management of the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Planning authority needs to make an appointment to carry out a site visit, whom should they contact?	_	No ect only o	one)	
9. Declaration				_
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.			01/09/2016	