

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 removal or variation of a condition following grant of planning permission. 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 Na	ame, Address aı	nd Contact Details			
Title: Mr	First Name:	David		Surname:	Walter
Company name:	London Borough of	Camden			
Street address:	Camden Town Hal				
	Judd Street		Telephone numb	er:	
			Mobile number:		
Town/City:	London		Fax number:		
Country:			Email address:		
Postcode:	WC1H 9JE				
Are you an agent	acting on behalf of th	ne applicant?	Yes	l o	
2. Agent Name	, Address and C	Contact Details			
Title: Mr	First Name:	Robert		Surname:	Loader
Company name:	Robert Loader Arcl	nitect			
Street address:	30 Walkerscroft Me	ead			
			Telephone numb	oer: 0794	8801144
			Mobile number:		
Town/City:	London		Fax number:		
Country:			Email address:		
Postcode:	SE21 8LJ		studio@garden	ow.net	

3. Site Addres	ss Deta	ils																				
Full postal addre	ss of the	site (includi	ng full	postco	de wl	here a	availal	ble)		Descrip	otion:											
House:			Suff	ix:																		
House name:	Primros	e Hill Prima	ry Sch	ool																		
Street address:	: 36-40 Princess Road																					
								Ī														
Town/City:	LONDO)N																				
Postcode:	NW1 8J	 JL																				
5 (1																						
Description of lo (must be comple				'n):																		
Easting:	528304																					
Northing:	183909																					
4. Pre-applica	ation Ad	dvice																				
Has assistance of	or prior ac	dvice been s	ought	from th	e loc	al aut	hority	about	t this	applic	ation?	?			•	Yes	Q I	No				
If Yes, please co	mplete th	ne following	inform	ation ab	oout	the ac	lvice y	you we	ere gi	iven (t	his wi	ll hel	p the	author	ty to	deal w	ith thi	is appl	lication	more e	efficie	ntly):
Officer name:																						
Title: Ms	Fi	irst name:	S	arah									Surr	name:	Fre	eman						
Reference:		/leeting																				
Date (DD/MM/Y)	YYY): 1	6/09/2016	$\overline{}$	(Must b	e pre	e-appli	icatior	n subn	nissic	on)												
Details of the pre	e-applicat	ion advice r	eceive	d:																		
No issues fores	een.																					
5. Description	of the	Proposa	Ī																			
Please provide a		·											o rea	runner	level	and a	lterati	ons to	rear n	lavaroi	ınd le	vel
provisions. Inte	rnal alter	ations in und	dercrof																			
				40/000	4/5								_			,		40/6	20/004		$\overline{}$	
Application reference Please state the)16/232		cation		00.						Da	te of d	decisio	on:	19/0	08/2010	0		
Condition number		Tiuriber(s)	to will		аррііі	CallOII	Telate															
Condition 2																						
Has the develop	ment alre	ady started	? 🥷	Yes	0	No	If \	Yes, pl	lease	state	when	the	deve	opmen	t was	starte	ed:	22/0	08/201	6		
Has the develop	ment bee	n completed	d? (Yes	•	No																
6. Condition(s	s) - Ren	noval																				
Please state why	/ you wisl	h the conditi	ion(s) t	to be re	move	ed or	chanc	ged:														
We wish to reloc	cate the p	proposed es							to ru	ın dow	n to p	laygı	round	level a	long	the bo	undar	y wall	, rathe	r than v	vithin	the
general playgro			he pla	yground	d and	d lliw b	orovid	le more	e flex	dibility	in the	futuı	re use	of the	playg	ground	l.					
If you wish the ex	xisting co	ndition to be	e chan	ged, ple	ease	state	how y	you wi	sh th	e cond	dition 1	to be	varie	ed:								

6. Co	ndition(s)	- Remova					
The r	evised escap	e stair location	on is to be as shown on	the revised drawings (revision K) that accompa	any this application	on.
7. Sit	e Visit						
Can tl	ne site be see	en from a pub	olic road, public footpath	, bridleway or other public land?		○ Yes ⊚	No
If the	planning auth	nority needs to	o make an appointment	to carry out a site visit, whom sh	ould they con	tact? (Please sele	ect only one)
•	The agent	The apple	olicant Q Other p	person			
8. Ce	rtificates (Certificate	: A)				
freeho	ld interest or le	t certifies that c	on the day 21 days before the st with at least 7 years left to		England) Order scept myself/the h the application	applicant was the on relates, and that r	
Title:	Mr	First name	: Robert		Surname:	Loader	
Perso	n role:	AC	GENT	Declaration date:	27/0	09/2016	✓ Declaration made
9. De	claration						
drawii	ngs and addit	tional informa	tion. I/we confirm that, to	escribed in this form and the acc o the best of my/our knowledge, ne opinions of the person(s) givir	any facts state		Date 27/09/2016