

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 Planning Permission and consent to display advertisement(s). Town and Country Planning Act 1990

Town and Country Planning (Control of Advertisements) (England) Regulations 2007

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.

Applicant Name and Address	2. Agent Name and Address
Title: First name: M.	Title: First name: L
Last name: GLIGORION	Last name: OUVER
Company (optional): GDS LTD	Company (optional):
Unit: House house suffix:	Unit: House number: 11 House suffix:
House name:	House name:
Address 1: FOLGUNG GREEN ROAD	Address 1: MILLWAY
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town:
County: LONDON	County: London
Country:	Country:
Postcode: NW6 IDT	Postcode: NW 35L
3. Description of the Proposal Please describe the proposal including any change of use:  CMANGE OF USE FLOM	A3 (CAFE) TO BI (OFFILE)
of use already started?  Yes No work or use (date must if Yes, plear work or change of use heap completed?	ase state the date when building, e were started: (DD/MM/YYYY): the pre-application submission) ase state the date when the building, ange of use was completed (DD/MM/YYYY): the pre-application submission)

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House 156 -58 House suffix:	authority about this application?
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: FORTUNE GLEEN ROAD	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town:	P. C.
County: LONDON	Reference:
Postcode NWh IDT	
Description of location or a grid reference.	Date (DD/MM/YYYY): (must be pre-application submission)
(must be completed if postcode is not known):	Details of pre-application advice received?
Easting: Northing:	Details of pre-application advice received:
Description:	
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
ls a new or altered vehicle access proposed	Do the plans incorporate areas to store
to or from the public highway?	and aid the collection of waste? Tyes \( \sum \) No
Is a new or altered pedestrian access proposed	If Yes, please provide details:
to or from the public highway?	
Are there any new public roads to be provided within the site? Yes X No	
Are there any new public rights of way to be provided	
within or adjacent to the site?	
Do the proposals require any diversions	Have arrangements been made for the separate
/extinguishments and/or creation of rights of way?	storage and collection
order or rights or ridy.	of recyclable waste? Yes X No
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
	]
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member (c) related to a member of staff	
(d) related to an elected member	er
If Yes, please provide details of the name, relationship and role	

9. Materials  If applicable, please state what materials are to be used externally." Include Type, colour and name for each material:								
	Existing (where ap	plicable)		Proposed		Not applicable	Don't Know	
Walls						×		
Roof			-			\sqrt{\sq}\ext{\sqrt{\sq}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}}		
Windows						¥		
Doors			i			₩.		
Boundary treatments (e.g. fences, walls)						M		
Vehicle access and hard-standing						k		
Lighting							8	
Others (please specify)							k	
				design and access stateme	nt? X Yes		No	
		the plan(s)/drawing(s)/desig	n and access	s statement:				
Ste A	MACH 	<b>9)</b> ,						
10. Vehicle Parkin	g						=	
Please provide info	rmation on	the existing and proposed r	number of on	-site parking spaces:				
Type of Vehicl	е	Total Existing	Total proposed (including Differe spaces retained) in spa					
Cars		_			_			
Light goods vehic public carrier veh	cles/ icles	_						
Motorcycles								
Disability space	es							
Cycle spaces			_					
Other (e.g. Bus	s)		~					
Other (e.g. Bus	Other (e.g. Bus)							

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11. Foul Sewage	12. Assessment of Flood Risk				
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and				
Mains sewer Cess pit	consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)				
Septic tank Other	Yes No				
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider				
Are you proposing to connect to the existing drainage system? Yes No	the risk to the proposed site.				
If Yes, please include the details of the existing system on the	is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No				
application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes X No				
	How will surface water be disposed of?				
	Sustainable drainage system Existing watercourse				
	Soakaway Pond/lake				
	Main sewer				
13. Biodiversity and Geological Conservation	14. Existing Use				
	Please describe the current use of the site:				
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable	4				
likelihood that any important biodiversity or geological	LECENTLET CLOSED CAFE				
conservation features may be present or nearby and whether they are likely to be affected by your proposals.					
Having referred to the guidance notes, is there a reasonable					
likelihood of the following being affected adversely or conserved	Is the site currently vacant?				
and enhanced within the application site, or on land adjacent to or near the application site?	If Yes, please describe the last use of the site:				
a) Protected and priority species:					
Yes, on the development site	CAFE				
Yes, on land adjacent to or near the proposed development					
∏ No					
b) Designated sites, important habitats or other biodiversity features:	When did this use end (if known)? (DD/MMYYYY)  CIRCA APRIL				
Yes, on the development site	(date where known may be approximate)				
Yes, on land adjacent to or near the proposed development	Does the proposal involve any of the following?  If yes, you will need to submit an appropriate contamination				
⊠ No	assessment with your application.				
c) Features of geological conservation importance:	Land which is known to be contaminated? Yes No Land where contamination is				
Yes, on the development site	suspected for all or part of the site? Yes X No				
Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly vulnerable				
[ 🗷 No	to the presence of contamination?				
15. Trees and Hedges	16. Trade Effluent				
Are there trees or hedges on the proposed development site?  Yes No	Does the proposal involve the need to dispose of trade effluents or waste?				
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal				
proposed development site that could influence the development or might be important as part	of trade effluents or waste				
of the local landscape character?					
If Yes to either or both of the above, you <u>may</u> need to provide a full Tree Survey, at the discretion of your local planning authority. If a					
Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning					
authority should make clear on its website what the survey should contain, in accordance with the current BS5837: Trees in relation to					
design, demolition and construction - Recommendations'.					

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Does your proposal in	I7. Residential Units (Including Conversion)  Does your proposal include the gain, loss or change of use of residential units? Yes Yes No  If Yes, please complete details of the changes in the tables below:														
Proposed Housing							Existi	ng F	lous	ing					
Market	Not	4	Numb				Total	Market	Not		Numb				Total
Housing Houses	known	1	2	3	4+	Unknown	ą.	Housing	known	1	2	3	4+	Unknown	0.0
Flats and malsonettes					<u> </u>		-u fo	Houses							3
Live-work units						1	ů.	Flats and maisonettes			<u> </u>				<u>@</u>
Cluster flats	-						ď	Live-work units							4.2
Sheltered housing							0	Cluster flats							.31
Bedsit/studios			_					Sheltered housing							93
Unknown type							1	Bedsit/studios							±
Olikilossii type		otale	/2 ± h	101	d + a	+ f + g) =	- 9 - A	Unknown type							Û
<u> </u>	10	ntais	(a Tu	тьт	ure	+1+g) -	188	<u> </u>	Т	otals	(a + b	+ C +	d+e	+ f + g) =	42
	Not		Numb	nor of	Bodo	nome	Total		Mad		Numb	ner of	Rodr	oome	Total
Social Rented	known	1	2	3	4+	Unknown	10101	Social Rented	Not known	1	2	3		Unknown	Total
Houses							ij	Houses							ij
Flats and maisonettes							b	Flats and maisonettes							10
Live-work units							ō.	Live-work units							4
Cluster flats							ď	Cluster flats			0				ď.
Sheltered housing							÷	Sheltered housing							ş
Bedsit/studios							7	Bedsit/studios							7
Unknown type							9	Unknown type							9
Totals $(a+b+c+d+e+f+g) =$			S		Totals $(a+b+c+d+e+f+g) =$				ţ.						
Intermediate	Not known	1	Numb 2	er of	Bedn 4+	ooms Unknown	Total	Intermediate	Not known	1	Numb 2	er of		ooms Unknown	Total
Houses							a	Houses					ļ		J.A
Flats and maisonettes							Ď	Flats and maisonettes							à
Live-work units							, c	Live-work units							¢
Cluster flats							ď	Cluster flats							ű
Sheltered housing							8	Sheltered housing							÷
Bedsit/studios							Ť	Bedsit/studios							1
Unknown type							-11	Unknown type							Į.
	To	otals	(a + b	+ C +	d+e	+ f + g) =	Ċ		To	otals	(a+b)	+ C +	d+e	+f+g)=	27
									· ·						I = 1 1
Key worker	Not known		Numb 2	er of		ooms Unknown	Total	Key worker	Not known		Numb 2	er of		ooms Unknown	Total
Houses		·	_				ā	Houses		·	-	Ť			-A
Flats and maisonettes							ь	Flats and maisonettes			-				14
Live-work units							e e	Live-work units							É
Cluster flats							ď	Cluster flats							ii.
Sheltered housing							3	Sheltered housing							
Bedsit/studios							P	Bedsit/studios							17
Unknown type							9	Unknown type							á
31-		otals	(a + b	+ c +	d+e	+ f + g) =	Đ			otals	(a + b	+ C+	d+e	+ f + g) =	H
															_
Total proposed r	esident	ial ur	nits	(A +	B + C	+ D) =		Total existing	residen	tial u	nits	(E-	F + C	3 + H) =	
TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total):															

If y	ou have answ	ered Yes to		estion above ple	ase add details	in the follow	ing table:	
U	Use class/type of use		Existing gross internal floorspace (square metres)	internal to be lost by change of floorspace use or demolition		Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	She	ops						90 N. O. D.
	Net trada	ible area:				100000	age a fu	
A2		ial and al services						
A3	Restaurant	s and cafes			1			
A4	Drinking est	ablishments						
A5	Hot food t	akeaways						
B1 (a)	_ `	er than A2)						
B1 (b)		rch and pment						
B1 (c)		dustrial					5	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
B2	General	industrial						
В8	Storage or				78			
C1		d halls of ence					3	
C2	Residential					income and a second		
D1	Non-res	idential utions						
D2		and leisure						
OTHER								
Please	0		<del>                                     </del>					
specify	To	tal	-					
ln a			tial in	stitutions and ho	stels, nlease ad	ditionally in	dicate the loss or gain of	rooms
Use	Type of use	Not		ing rooms to be I	ost by change	Total room	ns proposed (including	Net additional rooms
class C1	Hotels	applicable		of use or dem	iolition	Cî	nanges of use)	
3000000	Residential							
C2	Institutions							
OTHER Please								
specify								
0 En	nployment						-	
		following in	format	ion regarding em	nplovees:			
				Full-time		time		al full-time
E	Existing employees –					-	quivalent	
Pro	Proposed employees 4		4	_		4		
0 Ha	urs of Ope	nina						-
		_	f oper	ning (e.g. 15:30) f	or each non-res	sidential use	proposed:	
	Use			to Friday	Saturda		Sunday and Bank Holidays	Not known
							Dank Hondays	
							· · · · · · · · · · · · · · · · · · ·	
4 6:4	e Area							
ı. OIT	<b>e Area</b> tate the site a							

22. Industrial or Commercial Proce	sses and Machin	ery					
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:							
Is the proposal a waste management develo	pment? Yes	No No					
If the answer is Yes, please complete the fol	lowing table:						
	including engit	pacity of the void in cubic metre neering surcharge and making r cover or restoration material ( lid waste or litres if liquid waste	no through put in tonnes				
Inert landfill							
Non-hazardous landfill							
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant							
Pyrolysis/gasification							
Metal recycling site							
Transfer stations							
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites							
Open windrow composting	T T						
In-vessel composting							
Anaerobic digestion	F						
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works			300 I				
Other treatment							
Recycling facilities construction, demolition and excavation waste		-2A H					
Storage of waste							
Other waste management							
Other developments							
Please provide the maximum annual operat	ional throughput of th	ne following waste streams:					
Municipal	100 5						
Construction, demolition and ex	xcavation						
Commercial and industr	ial						
Hazardous			3				
If this is a landfill application you will need to planning authority should make clear what	o provide further infor information it requires	rmation before your applicatior s on Its website.	can be determined. Your waste				
23. Hazardous Substances							
Does the proposal involve the use or storage the following materials in the quantities state		No Not ap	plicable				
If Yes, please provide the amount of each su		transition to the same of the					
Acrylonitrile (tonnes)	Ethylene oxide (t	onnes)	Phosgene (tonnes)				
Ammonia (tonnes)	Hydrogen cyanide (t	onnes)	Sulphur dioxide (tonnes)				
Bromine (tonnes)	Liquid oxygen (t	onnes)	Flour (tonnes)				
Chlorine (tonnes)	quid petroleum gas (t	onnes) Re	efined white sugar (tonnes)				
Other:		Other:	4.				
Amount (tonnes):		Amount (tonnes):					

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<u> </u>			
24. Type of Proposed Advertisen	4	25. Location of Adve	` .
Please describe the proposed advertiseme	ent(s):	Is the advertisement you a already in place?	re applying for Yes No
			الحزا العالمة ails of when the use or work started:
		ii res, piease provide det	and of when the use of work started.
Please indicate the number of the follow types of advertisement(s) you are applying		Is an existing advertiseme	nt(s) to be removed and replaced by the
Application for fascia sign(s)	2	advertisement(s) in this pr	
Application for a projecting or hanging sign		∑ Yes	No Not applicable
	1(0)	If Yes to either or both at	ove, please show the existing sign(s) on
Application for a hoarding(s)		an elevation drawing or p the drawing(s) or photogr	photograph and state the references for
Other		lite drawing(s) or priotogr	aprio.
If you selected Other, please describe:			Ē
		Later at a second at a second	
		Will the proposed advertis over a footpath or other p	
26. Advertisement Period			
Please state the period of time for which consent is sought for the advertisement:	From		date (DD/MM/YYYY)
27. Interest in the Land			
Does the applicant own the land or building	as where the adverts are	to be placed?	
If No, has the permission of the owner or a	ny other person entitled	,	
to give permission for the display of an ad	vertisement been obtaine	d?	
If No, why not?			
28. Details of Proposed Advertise	omant/a)		
	<u>_``</u>	and the state of the first of the state of t	Part I and I and I
Please provide a full description of each p			
-	Advertisement 1	Advertisement	2 Advertisement 3
Type:			
a) The height from the ground to the base of the advertisement (in metres)			
b) The dimensions of the proposed advertisement(H x W x D) (in metric)			
c) The maximum height of any of the individual letters and symbols (in metric)			
d) The colour of the text and background	ABIL BE 1 1		
e) Materials of the proposed sign(s)			
f) The maximum projection of advertisement from the face of the building			
Will any of the sign(s) be illuminated	Yes No	Yes	No Yes No
If Yes for any of the proposed signs, answer	g), h) and i)		
g) Details of method of illumination (internally illuminated/externally illuminated)			
h) illuminance levels (cd/m²)			
i) Will the illumination be static or intermittent?			

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29. Ownership Certificates and	Agricultural Land Declaration	
One Certi	ficate A, B, C, or D, must be completed with this application form CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
I certify/The applicant certifies that on the	evelopment Management Procedure) (England) Order 2015 Certificate day 21 days before the date of this application nobody except myself/ ig to which the application relates, and that none of the land to which the	he applicant was the
NOTE: You should sign Certificate B, C application relates but the land is, or is	C or D, as appropriate, if you are the sole owner of the land or building s part of, an agricultural holding.	to which the
* "owner" is a person with a freehold interes ** "agricultural holding" has the meaning g	st or leasehold interest with at least 7 years left to run. iiven by reference to the definition of "agricultural tenant" in section 65(8) of	the Act.
Signed - Applicant:		
	CERTIFICA	
I certify/ The applicant certifies that I ha 21 days before the date of this application application relates.  * "namer" is a person with a freehold intere-	velopment Management Procedure) (England) Order 2015 Certificative/the applicant has given the requisite notice to everyone else (as listed on, was the owner* and/or agricultural tenant** of any part of the land st or leasehold interest with at least 7 years left to run. ven in section 65(8) of the Town and Country Planning Act 1990	below) who, on the day
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
L	11	

I certify/ The applicant certifies that:  Neither Certificate A or B can be	CERTIFICATE OF OWNERS velopment Management Pro issued for this application		
the land or building, or of a part of "owner" is a person with a freehold interes ** "agricultural tenant" has the meaning giv	of it, but I have/ the applicant h t or leasehold interest with at le	has been unable to do so. ast 7 years left to run.	-9
The steps taken were:			
Name of Owner / Agricultural Tenant	000000000000000000000000000000000000000	Address	Date Notice Served
Notice of the application has been publis (circulating in the area where the land is		er On the following date (what han 21 days before the d	
Signed - Applicant:	Or signed - A	gent:	Date (DD/MM/YYYY):
I certify/ The applicant certifies that:	this application sken to find out the names and owner* and/or agricultural ter ble to do so.	cedure) (England) Order 2015 Certific  I addresses of everyone else who, on the nant** of any part of the land to which the last 7 years left to gun	day 21 days before the
Notice of the application has been publis (circulating in the area where the land is	hed in the following newspap situated):	er On the following date (withan 21 days before the	
Signed - Applicant:	Or signed - A	gent:	Date (DD/MM/YYYY):
30. Planning Application Require Please read the following checklist to malinformation required will result in your apthe Local Planning Authority has been su	e sure you have sent all the in plication being deemed invali	nformation in support of your proposal. It d. It will not be considered valid until all	Failure to submit all information required by
The original and 3 copies of a completed application form:	and dated	The correct fee: APPLICANT ON	07828 134911 5
The original and 3 copies of the plan which the land to which the application relates of identified scale and showing the direction	rawn to an of North:	The original and 3 copies of a design ar if required (see help text and guidance  The original and 3 copies of the comple Ownership Certificate (A, B, C or D - as	nd access statement, notes for details):
The original and 3 copies of other plans a information necessary to describe the sul		and Article 14 Certificate (Agricultural I	Holdings):

31. Declaration		
I/we hereby apply for planning permission/consent as descri-	ribed in thi	is form and the accompanying plans/drawings and additional acts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them.	ige, ally la	icts stated are true and accurate and any opinions given are the
Signed - Applicant: Or signed -	- Agent:	Date (DD/MM/YYYY):
		IB/08/2016 (date cannot be pre-application)
32. Applicant Contact Details		33. Agent Contact Details
Telephone numbers		Telephone numbers
	ension mber:	Country code: National number: Extension number:
Country code: Mobile number (optional):		Country code: Mobile number (optional):
		07832 371999
Country code: Fax number (optional):		Country code: Fax number (optional):
Eval address (selional)		Provided the second sec
Email address (optional):		Email address (optional):
		l divers. bdc @ hopmand. co. uk
34. Site Visit		
Can the site be seen from a public road, public footpath, brid	dleway or	other public land? Yes No
If the planning authority needs to make an appointment to co	carry	Agent Other (if different from the
out a site visit, whom should they contact? (Please select only	/ one)	Agent Applicant Unier (if different from the agent/applicant's details)
If Other has been selected, please provide:  Contact name:		Telephone number:
Email address:		