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Application for Planning Permission. Town and Country Planning 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. Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: MYZ First name: TOTT
Last name:	Last name: HACKNW.
Company (optional):	Company (optional): LOND(N PCANNING SONICE)
Unit: House House suffix:	Unit: Induse suffix: Induse suffix:
House name:	House name: (O) (EGENCY 17.
Address 1:	Address 1: LONDON
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town:
County:	County:
Country:	Country:
Postcode:	Postcode: SWIV 4EF
3. Description of the Proposal	
Please describe the proposed development, including any change of	f use:
New Front	gale.
Has the building, work or change of use already started?	Yes -No
If Yes, please state the date when building,	(date must be pre-application submission)
work or use were started (DD/MM/YYYY): Has the building, work or change of use been completed?	Yes No
If Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY):	(date must be pre-application submission)
	\$Date:: 2015-04-02 #\$ \$Revision: 6149 \$

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
Unit: House number: 22 A House suffix:	authority about this application?
House REUSIZE GROVE	If Yes, please complete the following information about the advice
Address 1:	you were given. (This will help the authority to deal with this application more efficiently).
Address 2:	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDEN	
County:	Reference:
Postcode (ontional) NW 3	
Optional): [W > Description of location or a grid reference.	Date (DD/MM/YYYY):
(must be completed if postcode is not known):	(must be pre-application submission)
Easting: Northing:	Details of pro-application advice received?
Description:	
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed	
to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste? Yes No
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway?	
Are there any new public roads to be	
provided within the site? Yes 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
/extinguishments and/or creation of rights of way?	for the separate storage and
If you answered Yes to any of the above questions, please show	collection of recyclable waste? Yes No If Yes, please provide details:
details on your plans/drawings and state the reference of the plan (s)/drawings(s)	in res, prease provide detains.
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 membe	
If Yes, please provide details of the name, relationship and role	
100	

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			Don't Know			
Walls	· ·	BRI CIC		AS EXISTING					
Roof									
Windows									
Doors		TLABUT GA	Té	AS.	-FXIJTING				
Boundary treatments (e.g. fences, walls)	TIM	NBER COLUM	N -	AS EXISTING					
Vehicle access and hard-standing									
Lighting									
Others (please specify)									
, ,,,,,		rmation on submitted plan(s)/o		•	statement? Yes		No		
If Yes, please state refer	rences for t	he plan(s)/drawing(s)/design a	nd access	statement:					
10. Vehicle Parkin	g						=		
Please provide infor	mation on	the existing and proposed nur	nber of or	n-site parking spaces	:				
Type of Vehicl				al proposed (including proposed (including spaces retained) proposed in spaces					
Cars									
Light goods vehicles/ public carrier vehicles									
Motorcycles									
Disability spac	es		_						
Cycle spaces	i								
Other (e.g. Bu	s)								
Other (e.g. Bus)									

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of: Mains sewer Cess pit	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 consult Environment Agency standing advice and your local
Septic tank Other	planning authority requirements for Information as necessary.) Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to	Is your proposal within 20 metres of a
connect to the existing drainage system? Yes No	watercourse (e.g. river, stream or beck)? Yes No Will the proposal increase
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	the flood risk elsewhere? Yes 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	C3 - RESIDENTIAL.
likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	[CS - 128310(1) [11] (3)
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? Yes No
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	
Yes, on land adjacent to or near the proposed development	
□ No	When did this use end (if known)? DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity	(date where known may be approximate)
features: Yes, on the development site	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, op land adjacent to or near the proposed development	Land which is known to be contaminated? Yes No
□ No/	Land where contamination is
c) Features of geological conservation importance:	suspected for all or part of the site? Yes No
Yes, on the development site Yes, on land adjacent to or near the proposed development	A proposed use that would be particularly witherable
□ No	to the presence of contamination?
15. Trees and Hedges Are there trees or hedges on the	16. Trade Effluent Does the proposal involve the need to
proposed development site? Yes No	dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part 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	
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	

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17. Residential Ur Does your proposal in If Yes, please complete	nits (In clude the details	clud e gair of th	l ing n, loss e chai	Conv or ch nges i	/ersi ange n the	on) of use of tables be	resider low:	itial units? Yes	D*	6					
F	ropos	ed F	lous	ing					Existi	ng F	lous	ing			
Market	Not			er of			Total	Market Housing	Not known	1	Numb	oer of		ooms Unknown	Total
Housing Houses	known	1	2	3	4+	Unknown		Houses			2	3	47	UTIKITOWII	i i
Flats and maisonettes					_			Flats and maisonettes							-
Live-work units								Live-work units							
Cluster flats					-			Cluster flats							
Sheltered housing								Sheltered housing							-
Bedsit/studios							1	Bedsit/studios		_					1
Unknown type							-	Unknown type	7						7
- January 1		otals	(a + b	+ C +	d + e	+ f + g) =		,	To	otals	(a + t) + C +	d+e	+ f + g) =	
						5,									
Social Rented	Not known	1	Numk 2	per of		ooms Unknown	Total	Social Rented	Not known	1	Numl 2	oer of	Bedr 4+	ooms Unknown	Totai
Houses								Houses							1
Flats and maisonettes								Flats and maisonettes							
Live-work units			-					Live-work units							
Cluster flats								Cluster flats							25
Sheltered housing								Sheltered housing							
Bedsit/studios								/Bedsit/studios							- 11
Unknown type								Unknown type							-
	Te	otals	(a + b	+ C +	d + e	+ f + g) =	\perp		T	otals	(a + l) + C +	- d + e	+f+g)=	. =
Intermediate	Not known	1	Numb 2	oer of		ooms Unknow <i>y</i>	Total	Intermediate	Not known	1_	Num 2	ber of	Bedr 4+	ooms Unknown	Total
Houses								Houses							
Flats and maisonettes						-/-	-	Flats and maisonettes			-				
Live-work units						/	-	Live-work units			_	-	-		15
Cluster flats						/	- 0	Cluster flats				-	-		
Sheltered housing					-/		-	Sheltered housing				-			
Bedsit/studios					1		_	Bedsit/studios				-			
Unknown type	ш_				/		-	Unknown type			/-			61	
	Į.	otals	(a + £) + C #	a + e	+ f + g) =				otais	(a +)	0+6-	+ u + E	e + f + g) =	
Key worker	Not known	_				ooms Unknowr	Total	Key worker	Not known	1	Num 2	ber o		ooms Unknown	Total
Houses			V					Houses							
Flats and maisonettes								Flats and maisonettes							100
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
	T	otals	(a + l) + C +	d + e	(+f+g)=			Т	otals	s (a +	b + c	+ d + e	e + f + g) =	
Total proposed	residen	tial u	nits	(A +	B + C	C + D) =		Total existing	reside	ntial	units	(E	+ F +	G + H) =	
TOTAL NET GAIN or	TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total): SDate: 2015-04-02 #5 SRevision 6149 5														

18. All Types of Development: Non-residential Floorspace Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No								
Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes Yes If you have answered Yes to the question above please add details in the following table:								
	se class/type of use	Not applicable		Gross internal to be lost by use or der	l floorspace change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A1	Shops							
	Net tradable area:							
A2	Financial and professional services							
А3	Restaurants and cafes					2		
A4	Drinking establishments							
A5	Hot food takeaways							
B1 (a)	Office (other than A2)						λ	
B1 (b)	Research and development							
B1 (c)	Light industrial			/				
B2	General industrial							
B8	Storage or distribution							
C1	Hotels and halls of residence							
C2	Residential institutions	\Box						
D1	Non-residential	Ħ						
D2	Assembly and leisure	F						
OTHER		ī						
Please		Ħ						
Specify	Total	H						
In ad		tial inc	titutions and ha	otola wieseo ad	ditions illustrate	 		
Use	dition, for hotels, resident	71 hr 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ng rooms to be I			is proposed (including		
class	Type of use applicable		of use or dem	olition		nanges of use)	Net additional rooms	
C1	Hotels Residential							
C2	Institutions							
OTHER Please								
Specify								
19. Em	ployment							
Please co	omplete the following inf	ormat	ion regarding er	nployees:				
			Full-time	Part	time		al full-time guivalent	
Exi	isting employees						1-101011	
Pro	posed employees							
20. Hai	urs of Opening							
If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed:								
Use Monday to Friday Saturday Sunday and Not known								
						Bank Holidays		
21. Site	e Area							
Please state the site area in hectares (ha) 0-2h4 (NY/24X)								
.0000 31		(114	/ U LIN	C 114 4 F. 13				

22. Industrial or Commercial Proce	sses	and Machinery	1					
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 development?								
If the answer is Yes, please complete the following table:								
	Not applicable	The total capaci including engine allowance for co tonnes if solid	ty of the void in c ering surcharge a over or restoration waste or litres if li	nd making no material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)			
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		/						
In-vessel composting		/						
Anaerobic digestion	$\overline{\Box}$	/	/					
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment	Z							
Recycling facilities construction, demolitien and excavation waste								
Storage of waste	느							
Other waste management								
Other developments								
Please provide the maximum annual operat	ional	throughput of the	following waste s	streams:				
Municipal								
Construction, demolition and e		ation						
Commercial and indust Hazardous	паі							
If this is a landfill application you will need to planning authority should make clear what	o pro	vide further inform	nation before you on its website.	r application car	n be determined. Your waste			
23. Hazardous Substances	o of -	my of						
Does the proposal involve the use or storag the following materials in the quantities sta			□ NO	Not applica	ble			
If Yes, please provide the amount of each su								
Acrylonitrile (tonnes)		Ethylene oxide (ton			Phosgene (tonnes)			
Ammonia (tonnes)	Ammonia (tonnes) Sulphur dioxide (tonnes)							
Bromine (tonnes)		Liquid oxygen (tor	ines)		Flour (tonnes)			
Chlorine (tonnes)	quid	petroleum gas (tor	nnes)	Refine	d white sugar (tonnes)			
Other:			Other:					
Amount (tonnes):			Amount (ton	nes):	\$Date: 2015-04-02 #\$ \$Revision: 6149 \$			

24. Ownership Certificates and	Agricultural Land Declaration	
One Certif	icate A, B, C, or D, must be completed with this applicat CERTIFICATE OF OWNERSHIP - CERTIFICATE A	ion form
certify/The applicant certifies that on the owner* of any part of the land or building s part of, an agricultural holding**	velopment Management Procedure) (England) Order 20 te day 21 days before the date of this application nobody ex g to which the application relates, and that none of the land	ccept myself/ the applicant was the I to which the application relates is, or
NOTE: You should sign Certificate B, C application relates but the land is, or is	or D, as appropriate, if you are the sole owner of the lan s part of, an agricultural holding.	d or building to which the
" "owner" is a person with a freehold intere "* "agricultural holding" has the meaning g	st or leasehold interest with at least 7 years left to rup given by reference to the definition o	ection 65(8) of the Act.
Signed - Applicant:	Or signed - Agen	Date (DD/MM/YYYY):
		28/10/16
21 days before the date of this application application relates. * "owner" is a person with a freehold intere ** "agricultural tenant" has the meaning g	ve/the applicant has given the requisite notice to everyone on, was the owner* and/or agricultural tenant** of any pa st or leasehold interest with at least 7 years left to run. iven in section 65(8) of the Town and Country Planning Act 19	rt of the land or building to which this
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):

24. Ownership Certificates and Agricultural Land Declaration (continued) CERTIFICATE OF OWNERSHIP - CERTIFICATE C Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Neither Certificate A or B can be issued for this application All responsible starts have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of									
 All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** 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. "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 									
The steps taken were:									
Name of Owner / Agricultural Tenant	Address		Date Notice Served						
Notice of the application has been publi (circulating in the area where the land is		On the following date (which than 21 days before the date							
Office of Applicant	Onstant Name		Date (DD/MM/YYYY):						
Signed - Applicant:	Or signed - Agent:		Date (DD/IVIIVI/TTTT).						
CERTIFICATE OF OWNERSHIP - CERTIFICATE D Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/ The applicant certifies that: Certificate A cannot be issued for this application All reasonable steps have been taken to find out the names and addresses of everyone else who, on the day 21 days before the date of this application, was the owner* and/or agricultural tenant** of any part of the land to which this application relates, 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. * "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 The steps taken were:									
Notice of the application has been publis (circulating in the area where the land is		On the following date (which than 21 days before the date							
Clare of Amelianate	Ornigand Aponts		Date (DD/MM/WW)						
Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):									
25. Planning Application Requirely Please read the following checklist to mainformation required will result in your at the Local Planning Authority has been su	ike sure you have sent all the information i pplication being deemed invalid. It will no	n support of your proposal. Failu It be considered valid until all inf	ure to submit all ormation required by						
The original and 3 copies of a completed application form:	P .		accoss statement						
The original and 3 copies of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The original and 3 copies of a design and access statement, if required (see help text and guidance notes for details): The original and 3 copies of the completed, dated Qwnership Certificate (A, B, C or D – as applicable)									
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:									

26. Declaration		
I/we hereby apply for planning permission/consent information. I/we confirm that, to the best of my/or genuine opinions of the person(s) giving them.	t as described in th ur knowledge, a	nis form and the accompanying plans/drawings and additional are true and accurate and any opinions given are the
Signed - Applicant: C	r signed - Ager	Date (DD/MM/YYYY):
		28/16/16 (date cannot be pre-application)
27. Applicant Contact Details		B. Agent Contact Details
Telephone numbers		Telephone numbers
Country code: National number:	Extension number:	Country code: National number: Extension number: number:
Country code: Mobile number (optional):		Country code: Mobile number (optional):
Country code: Fax number (optional):	_	Country code: Fax number (optional):
Email address (optional):		Email address (optional):
		Scotthackner 2 gmail- am
29. Site Visit		<i></i>
Can the site be seen from a public road, public fool	tpath, bridleway o	or other public land? Yes No
If the planning authority needs to make an appoint out a site visit, whom should they contact? (Please	tment to carry select only one)	Agent Applicant Other (if different from the agent/applicant's details)
If Other has been selected, please provide:		
Contact name:		Telephone number:
Email address:		