

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 Name, Address and Contact Details									
Title:	First Name:			Surname:	Boultbee Brooks (Hatton Wall) Ltd				
Company name:									
Street address:	C/O Agent								
			Telephone numb	ber:					
			Mobile number:						
Town/City:			Fax number:						
Country:			Email address:						
Postcode:									
Are you an agent acting on behalf of the applicant?			🖲 Yes 🔵 N	10					

2. Agent Name, Address and Contact Details									
Title: Mr	First Name:	Matt		Surname:	Bailey				
Company name:	Planning Sense Lto	1							
Street address:	55 St John Street								
			Telephone numb	oer: 07989	9332405				
			Mobile number:						
Town/City:	London		Fax number:						
Country:			Email address:						
Postcode:	EC1M 4AN		matt@plannings	sense.co.uk					

3. Site Addres	ss Details						
Full postal addre	ss of the site (incl	uding full postcod	e where availab	ole)	Description:		
House:		Suffix:		7			
House name:	18-26		L	Ī			
Street address:	Hatton Wall			Ī			
				Ī			
				Ī			
Town/City:	LONDON			Ī			
Postcode:	EC1N 8JH			Ī			
Description of la		(a		_			
	cation or a grid re eted if postcode is						
Easting:	531269						
Northing:	181985						
4. Pre-applica	tion Advice						
Has assistance of	or prior advice bee	n sought from the	e local authority	about th	is application?	🔾 Yes 💿	No
5. Description	of the Propo	sal					
	description of the					astern facades, a three-s	torey roof extension, and single-
						wellery workshops (B1c)	
Application refere	ence number:	2016/4200)/P			Date of decision:	30/09/2015
Please state the Condition numbe	condition number er(s):	(s) to which this a	pplication relate	es:			
10 (d) Waste De	etails	-ile					
	e and screen Deta						
Has the development already started? Yes No If Yes, please state when the development was started: 13/10/2015							
Has the develop	ment been comple	eted? 🔾 Yes	No				
6. Discharge	of Condition(s	.)					
		,					
			aterials/details th	hat are b	eing submitted for app	proval:	
See attached dr	awings and docur	nentation					
7. Part Discha	arge of Condit	ion(s)					
A	ta dia ka	and the Pro-	- 0				
Are you seeking	to discharge only	part of a condition	17			💿 Yes 🔘 No	

If Yes, please indicate which part of the condition your application relates to:

Condition 11d (other elements addressed under original consent). Condition 10 in full.

8. Site Visit		
Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should the	Yes O No ney contact? (Please select only one)	
The agent		
9. Declaration		

I/	we hereby apply for planning permission/consent as described in this form and the accompanying plans/			
d	rawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are	1	Date	02/11/2016
tr	ue and accurate and any opinions given are the genuine opinions of the person(s) giving them.	Ŧ	Dale	