

Email: planning@camden.gov.uk Phone: 020 7974 4444

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

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.

1. Applicant Name and Address

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

2. Agent Name and Address

Title:	MR First name: GABNEC	Title: First name:
Last name:	BERNY-KHAN	Last name:
Company (optional):	CONDON BRENGH OF CAMDEN	Company (optional):
Unit:	House House suffix:	Unit: House number: House suffix:
House name:		House name:
Address 1:	PROPERTY & CONTRACTS -3 RD FLWR 5PS	Address 1:
Address 2:	CO TOWN HALL	Address 2:
Address 3:	JUDO STREET	Address 3:
Town:	CONDON	Town:
County:		County:
Country:	UK	Country:
Postcode:	WCIH 9JE	Postcode:
Please descr	otion of the Proposal Tibe the proposed development, including any change of ETENTION OF IIS SOLAR PHOTOVO PITCHED ROTES IN THREE LOCE	TUSE: PLITAIC (PV) PANELS INSTALLED ON ATTIONS ON COMMUNITY SCHOOL.
If Yes, please	ling, work or change of use already started? state the date when building, were started (DD/MM/YYYY):	Yes No / 2016 (date must be pre-application submission)
	ng, work or change of use been completed? state the date when the building, work	Yes No
	use was completed: (DD/MM/YYYY): 29/07/	(date must be pre-application submission)
Has the build If Yes, please work or use v Has the buildi If Yes, please	ling, work or change of use already started? state the date when building, were started (DD/MM/YYYY): ng, work or change of use been completed? state the date when the building, work	Yes No / 2016 (date must be pre-application submission) Yes No

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 House suffix:	authority about this application?
House name:	If Yes, please complete the following information about the advice
Address 1: ELEANOR PALMEL PRIMARY SCHOOL	application more efficiently).
Address 2: LUPTON ROAD	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	TONY YOUNG
County:	Reference:
Postcode TA	CORRESPONDENCE RE. 2016/4296/P (WITHORNAM
(optional):	Date (DD/MM/YYYY): 29/07/2016
(must be completed if postcode is not known):	(must be pre-application submission)
Easting: Northing:	Details of pre-application advice received? INSTALLATION MAY NOT MEET ALL CRITCLIA
Description:	INSTALLATION MAY NOT MEET HELL CRITECIA FOR PERMITTED DEVELOPMENT RIGHTS, HENCE A'CERTIFICATE OF LAWFUL DEVELOPMENT! APPUCATION NOT ADVISED.
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?
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway?	N/A
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 collection of recyclable waste?
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)	N/A
N/A	
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected memb	Do any of these statements apply to you? Yes No
If Yes, please provide details of the name, relationship and role	
MITHORITY IS APPLICANT	
	THY SOLION SUSTAINABILITY OFFICEZ (SCHOOLS) -
PROPERTY &	CONTRACTS - SWPORTING CONMUNTIES.

9. Materials If applicable, please stat	te what mat	erials are to be used	externally. Include	type, colour and name for	each material:		
	Existing (where app			Proposed		Not applicable	Don't Know
Walls							
Roof							
Windows							
Doors							
Boundary treatments (e.g. fences, walls)							
Vehicle access and hard-standing							
Lighting							
Others (please specify)	PV P/	thels: Polyc ilicon + Gla tinium fram sting (not i steel + A	CRYSTALUNE SS COATING+ JESIBLE): STA	NI) NŒSS	4		
Are you supplying add If Yes, please state refe - CO VERING LET - COD FORM - PRODUCT SHEE - SOUTH EAST - SOUTH WEST	litional informations of the second of the s	mation on submitte he plan(s)/drawing(N (\$48FS 1*2)	ed plan(s)/drawing(s s)/design and acces)/design and access staten	A N 1	<u> </u>	No
10. Vehicle Parkin	ng						
	rmation on	the existing and pro Total Existing		n-site parking spaces: I proposed (including spaces retained)	Differenc in space:		
Cars						_	
Light goods veh public carrier ve	icles/ hicles						
Motorcycle	s						
Disability spa							
Cycle space							
Other (e.g. B							
Other (e.g. Bu	us)						

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
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and 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 the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes No
	How will surface water be disposed of?
N/A	Sustainable drainage system Existing watercourse
1	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	EDUCATION - COMMUNITY PRIMARY
likelihood that any important biodiversity or geological conservation features may be present or nearby and whether	SCHOOL
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	If Yes, please describe the last use of the site:
or near the application site?	N/A
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:	Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination
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.
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features: Yes, on the development site 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 assessment with your application.
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\$Date:: 2013-01-09 #\$ \$Revision: 4684 \$

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	Topos						- A1	(Bedro		Tota
Market Housing	Not known	1	Numb 2	er of		Unknown	Total	Market Housing	Not known	1	2	3		Unknown	
Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units		/					
Cluster flats								Cluster flats	9						
Sheltered housing								Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type				0 3000 0				Unknown type							
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de c															
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Sheltered housing	7		_					Sheltered housing							
Bedsit/studios		ļ						Bedsit/studios							
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Houses								Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							<u> </u>
Cluster flats								Cluster flats							
Sheltered housing								Sheltered housing	9						
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
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Bedsit/studios						<u> </u>		Bedsit/studios					T		
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	-					31		L							
Total proposed						+ D) =		Total existing					-	5 + H) =	

		-		Non-resident in or change of u	-		pace? Yes	√No
				estion above plea		-	<u> </u>	
	se class/type o		Not applicable		Gross internal to be lost by use or den	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	Sho	ps			0.000000			
	Net trada	ble area:						
A2	Financi profession							
A3	Restaurants	and cafes			****			
A4	Drinking esta	ablishments						
A 5	Hot food to	akeaways						
B1 (a)	Office (other					S-210053011USL A) 1		
B1 (b)	Researc develor							
B1 (c)	Light inc							
B2	General ir	ndustrial						
B8	Storage or d	listribution						
C1	Hotels and reside	d halls of						
C2	Residential i	nstitutions						
D1	Non-resi institu							
D2	Assembly a			/				
OTHER								
Please Specify								
эреспу	Tot	al						
In ad	ldition, for hot	els, resident	ial ins	titutions and ho	stels, please add	ditionally inc	licate the loss or gain of	rooms
Use class	Type of use			ng rooms to be I of use or dem	ost by change	Total room	is proposed (including langes of use)	Net additional rooms
C1	Hotels							
C2	Residential Institutions							THE SECURITION OF PERSONS ASSESSMENT TO SEE THE SECURITION OF SECU
OTHER	Mistrations							
Please								
Specify								
	ployment	allande a ir £		tion kodavdina	oplovace:			
riease C	ompiete the fo	nowing inte	ormal	tion regarding er Full-time		time		al full-time
Ev	isting employe	900		i dir title	ran-		e	quivalent
L	posed employ							
			-					
	urs of Oper	_	ina fa	or each non-resid	antial usa pran	orad:		
riea	Use			to Friday	Saturda		Sunday and	Not known
	036	1416	ay	Lorinday	Jacuida		Bank Holidays	
				<u></u>				
21. Sit				- A	/	1	ON ROOFS I.E.	
Please st	ate the site are	ea in hectar	es (ha	0-017 HA	1 (18+ SAM	AT 25°)	ON REOFS THE. OVERLAID ON EXISTING PUILDING	E FOOTPRINT
								Date:: 2013-01-09 #\$ \$Revision: 4684 \$

22. Industrial or Commercial Proce	sses	and Machine	ery		
Please describe the activities and processes	which	would GE		0111	BLE ELECTRICITY & SUPPLY TO
be carried out on the site and the end produ plant, ventilation or air conditioning. Please	cts in	ciuuliiy - ma	IPHENT: S	OLAR PANE	LS, INVERTERS, METER, INTCHÉS, ASSOCIATED DEVICES <u>PABLING / FIXINGS (ALL WITHIN</u> TNG BUILDINGS)
type of machinery which may be installed or	site:		5	AFETY SW	CABLING/FIXINGS (ALL WITH)
Is the proposal a waste management develo	pmei	nt? Yes	No	EXIST	MG BUILDINGS)
If the answer is Yes, please complete the foll	owin	g table:		and the same of	
)le	The total capa	acity of the void	in cubic metr	es, Maximum annual operational
	Not applicable	including engir allowance for	neering surchar cover or restora	ge and making ation material	throughput in tonnes
	Not	tonnes if soli	d waste or litres	s if liquid waste	e) (or litres if liquid waste)
lnert landfill					
Non-hazardous landfill		F	annes a f		
Hazardous landfill					
Energy from waste incineration		g: 05000040000000000000000000000000000000			
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					
Any combined mechanical, biological and/ or thermal treatment (MBT)					
Sewage treatment works					
Other treatment					
Recycling facilities construction, demolition and excavation waste			/		
Storage of waste	П			*	
Other waste management	\exists				
Other developments					
Please provide the maximum annual operati	onal t	throughput of the	e following was	te streams:	
Municipal					,,,,
Construction, demolition and e	xcava	tion			
Commercial and industr	ial				
Hazardous					
If this is a landfill application you will need to planning authority should make clear what i	prov nform	vide further inforr nation it requires	mation before y on its website.	our applicatio	n can be determined. Your waste
23. Hazardous Substances		······································	· · · · · · · · · · · · · · · · · · ·		
Does the proposal involve the use or storage the following materials in the quantities state			No.	Notan	plicable
If Yes, please provide the amount of each sul			d:		pheasic
Acrylonitrile (tonnes)	Et	thylene oxide (to	nnes)		Phosgene (tonnes)
Ammonia (tonnes)	Hydr	ogen cyanide (to	nnes)	j /	Sulphur dioxide (tonnes)
Bromine (tonnes)	L	iquid oxygen (to	nnes)		Flour (tonnes)
Chlorine (tonnes)	uid p	etroleum gas (to	nnes)	Re	efined white sugar (tonnes)
Other:			Other:		
Amount (tonnes):			Amount (to	onnes):	

\$Date:: 2013-01-09 #\$ \$Revision: 4684 \$

24. Ownership Certificates and	Agricultural Land Declaration	
One Certificate A, B, C, or D, must be	completed, together with the Agricultural Holdings Cert	tificate with this application form
	CERTIFICATE OF OWNERSHIP - CERTIFICATE A	
I certify/The applicant certifies that on the owner (owner is a person with a freehold in which the application relates, and that no NOTE: You should sign Certificate B, C application relates but the land is, or is "owner" is a person with a freehold interest of the state of th	velopment Management Procedure) (England) Order 201 e day 21 days before the date of this application nobody exc iterest or leasehold interest with at least 7 years left to run) of at one of the land to which the application relates is, or is part o or D, as appropriate, if you are the sole owner of the land opart of, an agricultural holding. it or leasehold interest with at least 7 years left to run. spiven by reference to the definition of "agricultural tenant" in sec	cept myself/ the applicant was the ny part of the land or building to if, an agricultural holding** I or building to which the
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
ON REHALF OF LONDON BOROUGH	OF CAMPEN	30/12/206
	CERTIFICATE OF OWNERSHIP - CERTIFICATE B	
I certify/ The applicant certifies that I hava 1 days before the date of this application relates. * "owner" is a person with a freehold interest	velopment Management Procedure) (England) Order 201 ve/the applicant has given the requisite notice to everyone on, was the owner* and/or agricultural tenant** of any part of the street with at least 7 years left to run. oven in section 65(8) of the Town and Country Planning Act 1990	else (as listed below) who, on the day t 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					10 N	
Town and Country Planning (De		E OF OWNERS			under Article 12	
I certify/ The applicant certifies that:	veropinent mana	agement riot	eaare) (Eni	jianu) Order 2010 Certinicate	under Article 12	
 Neither Certificate A or B can be 	issued for this ap	plication				
 All reasonable steps have been the land or building, or of a part 	taken to find out t	the names and	addresses o	of the other owners* and/or ag	ricultural tenants** c	of .
* "owner" is a person with a freehold intere	st or leasehold inte	erest with at lea	st 7 years let	t to run.		
** "agricultural tenant" has the meaning g	iven in section 65(8) of the Town (and Country	Planning Act 1990		
The steps taken were:						
Name of Owner/ Agricultural Tenant		anni an	Address		Date Notice Serve	d
						- 1

						\neg
				/		
			/			
***************************************						_
		/				
Notice of the application has been publi		ving newspape	r	On the following date (which		
(circulating in the area where the land is	situated):			than 21 days before the date	of the application):	
						1.
Signed - Applicant:		Orcianad As	ont:		Date (DD/MM/YYY	W.
signed - Applicant.		Or signed - Ag	ent.		Date (DD/MINI/111	1):
			-1		J L	
Town and Country Planning (Det I certify/ The applicant certifies that: Certificate A cannot be issued for All reasonable steps have been to date of this application, was the of have/ the applicant has been una ""owner" is a person with a freehold interes ""agricultural tenant" has the meaning given The steps taken were:	relopment Mana this application aken to find out th owner* and/or ag able to do so. t or leasehold inter	ne names and a gricultural tena rest with at leas	edure) (Eng addresses of nt** of any p t 7 years left	land) Order 2010 Certificate f everyone else who, on the day part of the land to which this ag to run.	y 21 days before the	ıt I
The steps taken were:						_
Notice of the application has been publis (circulating in the area where the land is s	hed in the followi	ing newspaper		On the following date (which than 21 davs before the date		
(Circulating in the area where the land is	iituateu).			than 21 days before the date	or the application).	
Signed - Applicant:		Or signed - Age	ent.	Les-10-10-10-10-10-10-10-10-10-10-10-10-10-	Date (DD/MM/YYY)	<u>√</u>
orgined Applicant		gar signed rigi	-1114		Date (DB/MM/11)	ή
			·			
25. Planning Application Requir	ements - Che	cklist				
Please read the following checklist to ma			ormation in	support of your proposal Fails	ire to submit all	
information required will result in your ap						у
the Local Planning Authority has been su		,				
The original and 3 copies of a completed application form:	and dated	[J	The correct	fee:	{	<u> </u>
		L	The origina	and 3 copies of a design and	access statement.	
The original and 3 copies of the plan which				see help text and guidance no		
the land to which the application relates of identified scale and showing the direction			The origina	and 3 copies of the completed		_]
				Certificate (A, B, C, or D - as ap		ч
The original and 3 copies of other plans a information necessary to describe the sub		ation: 🗹	The original	l and 3 copies of the complete ertificate (Agricultural Holding	d, dated	

Signed <u>- Applica</u>	nt: 0	r signed - Agent:	Date (DD/MM/YYYY):
ON BEHALF	OF LANDON BODONGH OF CAMDON		30/12/2016 (date can
27. Applican	t Contact Details		28. Agent Contact Details
Telephone numl	bers		Telephone numbers
Country code:	National number:	Extension number:	Country code: National number: Exte
0044	020 79744550		
Country code:	Mobile number (optional):		Country code: Mobile number (optional):
Country code:	Fax number (optional):		Country code: Fax number (optional):
Email address (o	untionally		Email address (optional):
Cirial address (d	ptional.		Email address (optional).
		J	
29. Site Visit			
Can the site he si	oon from a public road public fonts	anth bridleway o	other public land? Yes (ROOFS No (ROOF 3) Agent Applicant Other (if different fro
Kab a planning an	eth mom a public road, public root		other public land.
out a site visit, w	hom should they contact? (Please s	elect only one)	Agent Applicant Other (if different fro
	selected, please provide:	•	ugcin/applicants de
Contact name:	., .		Telephone number:
	JSCEY - SCHOOL SITE OF	DIE	07952 534780

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