

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 a non-material amendment following a grant of planning permission. Town and Country Planning 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 a	nd Contact Details					
Title: Mr & Mrs	First Name:			Surname:	Macdonald		
Company name:							
Street address:	3, Aldred Road						
			Telephone number	ər:			
			Mobile number:				
Town/City:	LONDON		Fax number:				
Country:			Email address:				
Postcode:	NW6 1AN						
Are you an agent	acting on behalf of th	ne applicant?	Yes N	0			
2. Agent Name	, Address and C	Contact Details					
Title:	First Name:	Nicholas		Surname:	Pawlik		
Company name:	pawlik + wiedmer li	mited					
Street address:	Unit 1.33						
	75 Whitechapel Ro	ad	Telephone number	er: 0207	5393505		
			Mobile number:				
Town/City:	London		Fax number:				
Country:	United Kingdom		Email address:				

3. Site Addre	ss Details							
Full postal addre	ess of the site (ir	ncluding full p	ostcode where a	vailable)	Description:			
House:	3	Suffix	;					
House name:								
Street address:	Aldred Road							
Town/City:	LONDON							
Postcode:	NW6 1AN							
5 (1		,						
Description of lo (must be comple			):					
Easting:	525164							
Northing:	185264							
	5							
4. Eligibility								
Do you, or the p which this amen		behalf you a	re making this ap	plication, h	ave an interest in the part of	of the land to	es 🔘 N	lo
If you are not the	e sole owner, ha			of the Town	and Country Planning (De	evelopment	es 🔘 N	lo   Not Applicable
Management Pr	ocedure) (Engla	ind) Order 20	15 been given?					
Person notified		Address						Date of notification (DD/MM/YYYY)
		Number:	Suffi	x:	House name:			
		Street:						
		Town:						
		Postcode:						
		1 0010000.						
5. Description	n of Your Pro	oposal						
December of A	d Dd-							
Description of A			er ground floor an	d creation	of habitable space within th	e existing void below	the main h	building; first floor rear
			tions to roof and					
Reference numb	per: 2015/3	109/P						
*Date of decision (DD/MM/YYYY):	1 1 /1 // 1 /2 /	2016						
What was the or		n type?						
Householder pla	anning permissi	on						
	_		_		the original application type			
Mousehole	der developme	nt: Developm	ent to an existing	g dwelling-h	ouse or development within	its curtilage		
Other: any	thing not covere	ed by the abo	ve category					
6. Non-Mater	ial Amendme	ent(s) Soug	ght					
*Please describe	e the non-mater	ial amendmer	nt(s) you are seel	king to mak	e:			

S. Non-Material Amendmen	(s) Sought								
The client like to move the existing two windows entirely. As shown in		approximately 244 mm tov	vards the main part o	of the house and	d omit the smaller of the				
In addition to this, in lieu of an iron regulations at 1100mm above the		we would like to raise the	brick parapet by 2 b	rick coursed to	bring it in line with building				
Are you intending to substitute ame	ended plans or drawings?		•	Yes Q No					
Old plan/drawing numbers:	1450-PA_100 Rev B 1450- (unnamed drawing).	1450-PA_100 Rev B 1450-PA_120 Rev C 1450-PA_130 Rev B 1450-PA_300 Rev A Proposed Section A-A (unnamed drawing).							
New plan/drawing numbers:	_	14501-PA_100 Rev D 14501-PA_120 Rev D 14501-PA- 200 Rev D (previously - Proposed Section A-A (unnamed drawing).) 14501-PA_300 Rev B 14501-PA_310 - Existing and Proposed Rear Side Elevation							
Please state why you wish to make	this amendment:								
During the initial structural work th so make some small (non materia construction at first floor level.									
7. Pre-application Advice									
Has assistance or prior advice bee	n sought from the local authority	v about this application?		Yes O No					
·									
If Yes, please complete the following	g information about the advice	you were given (this will h	elp the authority to o	leal with this ap	plication more efficiently):				
Officer name:									
Title: First name	Kate		Surname: Hen	ry					
Reference: No referer	ICE		<u>,                                    </u>						
Date (DD/MM/YYYY): 13/04/201	(Must be pre-applicatio	n submission)							
Details of the pre-application advic									
Submit proposed alterations throu	Jh planning portal.								
Cita Vinit									
3. Site Visit									
Can the site be seen from a public	road, public footpath, bridleway	or other public land?	Yes	No					
If the planning authority needs to m	ake an appointment to carry ou	it a site visit, whom should	I they contact? (Plea	se select only o	one)				
The agent  The applic	ant Other person								
The agent	and Guilor pordon								
9. Authority Employee/Mem	ber								
With respect to the Authority, I am:									
<ul><li>(a) a member of staff</li><li>(b) an elected member</li></ul>	Do ar	y of these statements app	olv to vou?	0 \	∕es ⊚ No				
(c) related to a member o	f staff	,	, ,	_					
(d) related to an elected r	nember								
10. Declaration									
I/we hereby apply for planning perr	nission/consent as described in	this form and the accomp	anying plans/						
drawings and additional information	n. I/we confirm that, to the best	of my/our knowledge, any	facts stated are	✓ Date	18/04/2017				
true and accurate and any opinions	given are the genuine opinions	s of the person(s) giving th	iem.	Date					