

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

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: MZ First name: Tow
Last name:	Last name: SLATER ON BOTHER OF BIST ARCHITECTURES LTO
Company (optional): CHALK FARM WARING LLP	Company (optional): 215T RELATIFICATION ATD
Jnit: House House suffix:	Unit: House House suffix:
name:	House name:
Address 1:	Address 1: 3F COSUBEL EDAD
Address 2:	Address 2:
Address 3:	Address 3:
own:	Town:
County:	County:
Country:	Country:
Postcode:	Postcode: EIV 775.

3. Site Address Details	A Pro amplication Advisor	
Please provide the full postal address of the application site.	4. Pre-application Advice Has assistance or prior advice been sought from the local	
Unit: House House suffix:	authority about this application? Yes No	
House name: MAZNE VES	If Yes, please complete the following information about the advice	
Address 1: 4-80 HANGESTOCK HILL &	you were given. (This will help the authority to deal with this application more efficiently).	
Address 2: 45-47 CROPELAND ROAD	Please tick if the full contact details are not known, and then complete as much as possible:	
Address 3:	Officer name:	
Town:	Defense	
County:	Reference:	
Postcode (optional): NW3 28L	Date (DD/MM/YYYY):	
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?	
Easting: Northing:	application davice received:	
Description:		
5. Description Of Your Proposal Please provide a description of the approved development as shown of and date of decision in the sections below:	on the decision letter in all the state of t	
and date of decision in the sections below:	on the decision letter, including the application reference number	
DEMOUTION OF BUBBINS BULLDING LOT	H COTENTON	
	(Date must be pre-application submission) (DD/MM/YYYY)	
Please state the condition number(s) to which this application relates:	Sacrification (OD/MINV/1111)	
1. CONDITION 17a	6.	
2.	7.	
3.	8.	
4.	9.	
5.	10.	
Has the development already started?	Yes No	
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)	
Has the development been completed?	Yes No	
If Yes, please state when the development was completed (DD/MM/YY	(date must be pre-application submission)	
. Discharge Of Condition		
Please provide a full description and/or list of the materials/details that	are being submitted for approval:	
ALOUBTIC BEPORT BY WYG'		
Part Discharge Of Condition (s)		
Are you seeking to discharge only part of a condition?		
Yes, please indicate which part of the condition your application relates to:		
17a.		

8. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all th information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	ne information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by
The original and 3 copies* of a The completed and dated application form:	e original and 3 copies* of other plans and drawings nformation necessary to describe the subject of the application:
The correct fee:	D VIX PHONE WHEN CEPEDOSIONES
*National legislation specifies that the applicant must provide the o total of four copies), unless the application is submitted electronical LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pl	riginal plus three copies of the form and supporting documents (a ly or, the LPA indicate that a smaller number of copies is required. y post (for example, on a CD, DVD or USB memory stick).
9. Declaration	
I/we hereby apply for planning permission/consent as described in t information. I/we confirm that, to the best of my/our knowledge, an genuine opinions of the person(s) giving them.	:his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the
Signed - Applicant:	Or signed - Agent:
	ON BEHLEF OF
Date (DD/MM/YYYY):	
(date cannot be pre-application)	
10. Applicant Contact Details	11. Agent Contact Details
Telephone numbers	Telephone numbers
Country code: National number: Extension number: number:	Country code: National number: Extension number:
	020 7952 0252
Country code: Mobile number (optional):	Country code: Mobile number (optional):
South and a South	
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
	and address (optional).
12. Site Visit	
Can the site be seen from a public road, public footpath, bridleway o	or other public land? Yes No
the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (<i>Please select only one</i>)	Agent Applicant Other (if different from the agent/applicant's details)
Other has been selected, please provide:	
Contact name:	Telephone number:
Email address:	