

Email: planning@camden.gov.uk
Phone: 020 7974 4444
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Development Management
Camden Town Hall Extension
Argyle Street
London WC1H 8EQ

Application for removal or variation of a condition following grant of
planning permission. 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: | please see company name |
| Company name: | Castlehaven Row Limited | | | | |
| Street address: | c/o agent | | | | |
| | | | | | |
| | Telephone number: | | | | |
| | Mobile number: | | | | |
| Town/City: | Fax number: | | | | |
| Country: | Email address: | | | | |
| Postcode: | | | | | |
| Are you an agent acting on behalf of the applicant? | | | | | |
| <input checked="" type="radio"/> Yes <input type="radio"/> No | | | | | |

2. Agent Name, Address and Contact Details

| | | | | | |
|-----------------|-------------------|-------------|------|----------|--------|
| Title: | | First Name: | Anna | Surname: | Gargan |
| Company name: | Gerald Eve LLP | | | | |
| Street address: | 72 Welbeck Street | | | | |
| | | | | | |
| | Telephone number: | | | | |
| | Mobile number: | | | | |
| Town/City: | Fax number: | | | | |
| Country: | Email address: | | | | |
| Postcode: | W1G 0AY | | | | |

3. Site Address Details

Full postal address of the site (including full postcode where available)

House: Suffix:

House name:

Street address:

Town/City:

Postcode:

Description of location or a grid reference
(must be completed if postcode is not known):

Easting:

Northing:

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

5. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter:

"Conversion of two units into one; erection of rear extension with 4x roof lights at ground and basement level to provide 355sqm additional retail floorspace (A1) following demolition of existing rear extension."

Application reference number: Date of decision:

Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started? ☐ Yes ☒ No

6. Condition(s) - Removal

Please state why you wish the condition(s) to be removed or changed:

If you wish the existing condition to be changed, please state how you wish the condition to be varied:

7. 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 make an appointment to carry out a site visit, whom should they contact? (Please select only one)

☒ The agent ☐ The applicant ☐ Other person

8. Certificates (Certificate B)

Certificate of Ownership - Certificate B

Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14

I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, was the owner (owner is a person with a freehold interest or leasehold interest with at least 7 years left to run) and/or agricultural tenant ("agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990) of any part of the land or building to which this application relates.

| Owner/Agricultural Tenant | Date notice served |
|--|--------------------|
| Name: A Cretaigne and C Cretaigne Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: 251-259 Camden High Street Locality: <input type="text"/> Town: London Postcode: NW1 7BU | 07/07/2017 |
| Name: Gideon Ernst Chain Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: 251-259 Camden High Street Locality: <input type="text"/> Town: London Postcode: NW1 7BU | 07/07/2017 |
| Name: Hah-Anh Bui Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: 1 Ingle Mews Locality: <input type="text"/> Town: London Postcode: EC1R 1XG | 07/07/2017 |
| Name: A Major and F Major Number: <input type="text"/> Suffix: <input type="text"/> House name: Poyntz House Street: Harlestone Road Locality: Northampton Town: Northamptonshire Postcode: NN6 8A | 07/07/2017 |
| Name: James Nicholas Watson and Mark Robin Watson Number: <input type="text"/> Suffix: <input type="text"/> House name: Flat 14 Street: Castle Mill Locality: Lower Kings Roof | 27/07/2017 |

8. Certificates (Certificate B)

| | | |
|--------------|--|---|
| Town: | <input type="text" value="Berkhamsted"/> | |
| Postcode: | <input type="text" value="HP4 2FN"/> | |
| Title: | <input type="text"/> | First name: <input type="text"/> |
| | | Surname: <input type="text" value="Gerald Eve LLP"/> |
| Person role: | <input type="text" value="AGENT"/> | Declaration date: <input type="text" value="27/07/2017"/> |
| | | <input checked="" type="checkbox"/> Declaration made |

9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/ drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

☒ Date