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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.

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: MMS First name: KARIWA	Title: MA First name: MATTHEW
Last name: KATYSHEVA	Last name: BRUMBY
Company (optional):	Company (optional):
Unit: House number: //6A House suffix:	Unit: House number: /5 House suffix:
House name:	House name:
Address 1: HIGHGATE ROAD	Address 1: CLARENDON ROAD
Address 2:	Address 2:
Address 3:	Address 3:
Town: LONDON	Town: LOW DOW
County:	County:
Country:	Country:
Postcode: NW6 IPB	Postcode: E179AY
3. Description of the Proposal	
Please describe the proposed development, including any change of	use:
GROUND FLOOR REAR EXT	ENSION + ASSOCIATED WORKS
Has the building, work or change of use already started?	Yes No
If Yes, please state the date when building, work or use were started (DD/MM/YYYY):	(date must be pre-application submission)
Has the building, work or change of use been completed?	Yes No
If Yes, please state the date when the building, work or change of use was completed: (DD/MM/YYYY):	(date must be pre-application submission)
	\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$

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
House House	authority about this application?
number: 16 suffix:	
House name:	If Yes, please complete the following information about the advice
Address 1: FLA A	you were given. (This will help the authority to deal with this application more efficiently).
Address 2: HIKHKATE ROAD	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: Low Do W	
County:	Reference:
Postcode (optional):	
Description of location or a grid reference. (must be completed if postcode is not known):	Date (ØD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	
Description:	Details of pre-application advice received?
	/
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Wasta Stavens and Callastian
Is a new or altered vehicle access proposed	7. Waste Storage and Collection
to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste? Yes No
Is a new or altered pedestrian	
access proposed to or from	If Yes, please provide details:
the public highway? Yes No	
Are there any new public roads to be provided within the site?	
Are there any new public	
rights of way to be provided	
within or adjacent to the site? Yes No	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made
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)	
8. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member	
(c) related to a member of staff (d) related to an elected membe	r
If Yes, please provide details of the name, relationship and role	
in res, preude provide details of the fiditie, relationship and fole	

MaterialsIf applicable, please state what materials are to be used externally. Include type, colour and name for each material:								
	Existing (where applicable			Proposed	Not applicable	Don't Know		
Walls	REWDER	(/ PEBBLE	E DASH	REWDEN	2			
Roof	FLAT ROC	F FELT (COVENED	FLAT ROOF FE	ELT COVENED			
Windows	TIMBER	CASEME	EWT	TIMBER	CASEMENT			
Doors								
Boundary treatments (e.g. fences, walls)								
Vehicle access and hard-standing						7		
Lighting						d		
Others (please specify)						7		
Are you supplying addi				//design and access stater statement:	ment? Yes		No	
						ū.		
10. Vehicle Parking	n							
		ting and proposed	d number of or	n-site parking spaces:				
Type of Vehicl	e	Total Existing		proposed (including spaces retained)	Difference in spaces			
Cars				0 0				
Light goods vehic public carrier veh	cles/ icles	0		0	0			
Motorcycles		0		0	0			
Disability space	es	0		0	0			
Cycle spaces		0		0	0			
Other (e.g. Bus	5)		+					
Other (e.g. Bus	Other (e.g. Bus)							

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	Will the proposal increase the flood risk elsewhere? Yes No
plan(s)/drawing(s);	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	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 likelihood that any important biodiversity or geological	RESIDENTAL FLAT
conservation features may be present or nearby and whether	
they are likely to be affected by your proposals. Having referred to the guidance notes, is there a reasonable	Is the site currently vacant?
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to	Is the site currently vacant? If Yes, please describe the last use of the site:
or near the application site?	ii res, please describe the last use of the site.
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)?
b) Designated sites, important habitats or other biodiversity	DD/MM/YYYY (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
Yes, on the development site Yes, on land adjacent to or near the proposed development	assessment with your application.
No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No
Yes, on the development site Yes, on land adjacent to or near the proposed development	A proposed use that would
No	be particularly vulnerable to the presence of contamination?
15 Tupes and Hadres	16. Trade Effluent
15. Trees and Hedges Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste?
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character? Yes No	
If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a	
Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning	
authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to	
design, demolition and construction - Recommendations'.	
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		_													
Proposed Housing							Existing Housing								
Market Housing	Not known	1	Num 2	ber of	Bedr 4+	ooms Unknown	Total	Market Housing	Not known	1	Numl 2	ber of	Bedr 4+	ooms Unknown	Tota
Houses			T-			011111101111	8	Houses		Ė	_			OTIKTOWI	8
Flats and maisonettes							Ď.	Flats and maisonettes							-
Live-work units							- 4	Live-work units						1	
Cluster flats							Si	Cluster flats					1		ď
Sheltered housing							4	Sheltered housing							8
Bedsit/studios							Ť	Bedsit/studios							3
Unknown type							s.i	Unknown type		-					- 11
	T	otals	(a + b) + <i>c</i> +	d + e	+f+g)=	á		T,	otals	(a + b	+ + + +	d+e	+ f + q) =	į.
			~										HI. 70 740		
Social Rented	Not			per of	Bedr	ooms	Total	Social Rented	Not		Numb	er of	Bedre	ooms	Total
	known	1	2	3	4+	Unknown			known	1	2	3	4+	Unknown	
Houses							17	Houses							Q.
Flats and maisonettes							10	Flats and maisonettes							t t
Live-work units							Δ,	Live-work units							í.
Cluster flats							- Si	Cluster flats							17
Sheltered housing							120	Sheltered housing							L.
Bedsit/studios							1	Bedsit/studios							T.
Unknown type		_					1:	Unknown type							- 5
	Т	otals	(a + b	+ c +	d+e	+f+g)=			Т	otals	(a + b	+ c +	d + e	+f+g)=	, ii
	Not		Numb	ner of	Rodre	nome	Total	Not Number of Bedrooms			nome	Total			
Intermediate	known	1	2	3		Unknown	TOTAL	Intermediate	Not known	1	2	3		Unknown	
Houses					/		0	Houses							25
Flats and maisonettes							b	Flats and maisonettes							6
Live-work units							6	Live-work units							10
Cluster flats							ij.	Cluster flats							S.
Sheltered housing							ė.	Sheltered housing							de
Bedsit/studios		1					ă l	Bedsit/studios							4
Unknown type							9	Unknown type							ij
	T/c	tals	(a + b	+ <i>c</i> +	d + e	+ f + g) =			To	otals	(a + b	+ c +	d+e	+ f + g) =	4
	Not	1	Numb 2	er of			Total	Key worker	Not known		Numb				Total
Houses				3	4+	Unknown		Houses		1	2	3	4+	Unknown	
Flats and maisonettes								Flats and maisonettes							34
Live-work units				-				Live-work units	\exists						
Cluster flats					_		20	Cluster flats							- 1
Sheltered housing								Sheltered housing							148
Bedsit/studios								Bedsit/studios	\dashv						9
Unknown type							-	Unknown type							15
omatown type		tale	(a + b)	+ C 1	d + 0	+ f + q) =	27	Officiowii type		tele.	(a. 1 h	10'	da c	1.f. cl =	*
	10	cais	u + 0	гст	ите	11+9/-	300		10	, tais	u+0	+ (+	u+e	+f+g)=	177

18. All Types of Development: Non-residential Floorspace								
Does your proposal involve the loss, gain or change of use of non-residential floorspace? If you have answered Yes to the question above please add details in the following table:								
	lse class/type		licable		Gross interna to be lost by use or der	l floorspace change of nolition	Total gross internal floorspace proposed (including change of	
	T		Not	(square metre	s) (square r	netres)	use)(square metres)	(square metres)
A1		nops	Щ					
	110 Content to Content	able area:						
A2		cial and nal services						
A3	Restauran	ts and cafes						
A4	Drinking es	tablishments						
A5	Hot food	takeaways						
B1 (a)		ner than A2)						
B1 (b)		rch and opment						
B1 (c)	Light in	ndustrial			/			
В2	General	industrial						
В8	-	distribution						
C1		nd halls of dence						
C2		institutions						
D1		sidential utions						
D2		and leisure		/				
OTHER			Ø					
Please Specify		/						
Specify	Тс	otal						
In ad	dition, for ho	tels, resident	ial ins	titutions and h	ostels, please add	ditionally ind	licate the loss or gain of	rooms
Hen	Type of use				lost by change	Total room	s proposed (including anges of use)	Net additional rooms
C1	Hotels							
C2	Residential Institutions							
OTHÉR								
Please Specify								
	ployment	<u> </u>						
Please co	omplete the f	following info	rmati	on regarding e	mployees:			
				Full-time	Part-	time		al full-time guivalent
	isting employ		/					
Pro	posed emplo	yees	/_					
20. Ho	urs of Ope	ning			,			
	-	-	ng for	each non-resi	dential use propo	osed:		
	Use			to Friday	Saturday		Sunday and Bank Holidays	Not known
			/					
						-		
21. Site	Area			Sec. 14. 1000.00 1				
Please sta	ate the site a	rea in hectare	s (ha)	85 5	y. METRE	5		
SDate:: 2013-04-30 #\$ SRevision: 5504 \$								

24. Ownership Certificates and	Agricultural Land De	claration (co	ntinued)						
Town and Country Planning (De	CERTIFICATE OF OW	NERSHIP - CERT	TFICATE C	under Article 12					
I certify/ The applicant certifies that:									
 Neither Certificate A or B can be issued for this application All reasonable steps have been taken to find out the names and addresses of the other owners* and/or agricultural tenants** of 									
the land or building, or of a part of it, but I have/ the applicant has been unable to do so.									
* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990									
The steps taken were:									
			/	D . N .: 6					
Name of Owner / Agricultural Tenant		Address		Date Notice Served					
		/							
Notice of the application has been publis (circulating in the area where the land is	shed in the following new: situated):	spaper	On the following date (which than 21 days before the date						
(circulating in the died in jere the land is			lian Et adys serore the date	or the application,					
Signed - Applicant:	Or signe	d - Agent:		Date (DD/MM/YYYY):					
Town and Country Planning (Dev	CERTIFICATE OF OWN relopment Management	IERSHIP - CERTI Procedure) (Eng	FICATE D gland) Order 2010 Certificate	under Article 12					
 I certify/ The applicant certifies that: Certificate A cannot be issued for 	this application								
 All reasonable steps have been ta date of this application, was the o 	ken to find out the names	and addresses of	of everyone else who, on the day	/ 21 days before the					
have/ the applicant has been una	ble to do so.			oplication relates, but i					
* "owner" is a person with a freehold interest ** "agricultural tenant" has the meaning giv	or leasehold interest with a	at least 7 years lef	t to run. Planning Act 1990						
The steps taken were:	errin section 05(6) or the re	wirding Country	rianning Act 1990						
Notice of the application has been publish		paper	On the following date (which						
(circulating in the area where the land is s	ituated):		than 21 days before the date	or the application):					
Signed - Applicant:	Or signed	l - Agent:		Date (DD/MM/YYYY):					
25. Planning Application Requir	ements - Checklist								
Please read the following checklist to makinformation required will result in your ap	ke sure you have sent all the plication being deemed in								
the Local Planning Authority has been sul The original and 3 copies of a completed		The correc	t foo						
application form:		ĺ		_					
The original and 3 copies of the plan which	h identifies		al and 3 copies of a design and a (see help text and guidance no						
the land to which the application relates of identified scale and showing the direction	drawn to an	-	, , , ,						
	20 00 0		al and 3 copies of the complete Certificate (A, B, C or D – as app						
The original and 3 copies of other plans are information necessary to describe the sub-		and Article	12 Certificate (Agricultural Hol						
information necessary to describe the subject of the application:									

22. Industrial or Commercial Proce	sses	and Machine	ry			
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed or	icts in	cluding de the				
Is the proposal a waste management develo	pmei	nt? Yes	No			
If the answer is Yes, please complete the foll	owin	g table:				
	Not applicable	The total capa including engin allowance for o tonnes if solic	city of the void in cul eering surcharge and cover or restoration r I waste or litres if liqu	d making no material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)	
Inert landfill					/	
Non-hazardous landfill						
Hazardous landfill						
Energy from waste incineration						
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			S			
Any combined mechanical, biological and/ or thermal treatment (MBT)						
Sewage treatment works		/				
Other treatment	9					
Recycling facilities construction, demolition and excavation waste						
Storage of waste						
Other waste management						
Other developments						
Please provide the maximum annual operati	onal t	hroughput of the	following waste stre	eams:		
Municipal						
Construction, demolition and e		tion				
Commercial and industr	ial					
Hazardous				11 - 41		
If this is a landfill application you will need to planning authority should make clear what i	nforn	nation it requires	nation before your ap on its website.	pplication can	be determined. Your waste	
23. Hazardous Substances						
Does the proposal involve the use or storage the following materials in the quantities state			No 7	Not applicat	ole	
If Yes, please provide the amount of each sul			 I:			
Acrylonitrile (tonnes)	Phosgene (tonnes)					
Ammonia (tonnes)	Hydr	ogen cyanide (tor	nnes)	Sul	phur dioxide (tonnes)	
Bromine (tonnes)	nnes)		Flour (tonnes)			
Chlorine (tonnes) Lic	juid p	etroleum gas (tor	nnes)	Refined	white sugar (tonnes)	
Other:			Other:			
Amount (tonnes):			Amount (tonnes	s):		
	-				\$Date:: 2013-04-30 #\$ \$Revision: 5504 \$	

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding** NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): **CERTIFICATE OF OWNERSHIP - CERTIFICATE B** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 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* and/or agricultural tenant** of any part of the land or building to which this application relates. *"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. *"agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Date Notice Served Address 116 HIGHGATE LTD. 116 HIGHGATE ROAD, LOWDOW, NW51PB 01/08/2017 Or signed - Agent: Signed - Applicant: Date (DD/MM/YYYY): 01/08/2017

26. Declaration			
I/we hereby apply for planning permission/conso information. I/we confirm that, to the best of my genuine opinions of the person(s) giving them.			
Signed - Applicant:	Or signed -/Agent:	Date (DD/MM/YYYY):
,		01/	(date cannot be pre-application)
27. Applicant Contact Details		28. Agent Contact Details	
Telephone numbers		Telephone numbers	
Country code: National number:	Extension number:	Country code: National number	Extension number:
Country code: Mobile number (optional):		Country code: Mobile number (a	optional):
Country code: Fax number (optional):		Country code: Fax number (opti	onal):
Email address (optional):		Email address (optional):	
	J		
29. Site Visit			
Can the site be seen from a public road, public fo	otpath, bridleway or	other public land? Yes	No
If the planning authority needs to make an appoint a site visit, whom should they contact? (Pleas	ntment to carry e select only one)	Agent Applicant	Other (if different from the agent/applicant's details)
If Other has been selected, please provide:			3
Contact name:		Telephone number:	
Email address:			