

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:	Mr	First Name:	Lee	Surname:	Landau
Company name:					
Street address:	51, Fairfax Road				
	Telephone number:				
	Mobile number:				
Town/City:	LONDON				
	Fax number:				
Country:					
Postcode:	NW6 4EN				
	Email address:				
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:	Mr	First Name:	joe	Surname:	henry
Company name:	henry planning ltd				
Street address:	163				
	Church Hill Road				
	East Barnet				
Town/City:	BARNET				
	Telephone number:				
	Mobile number:				
Country:					
	Fax number:				
Postcode:	EN4 8PQ				
	Email address:				

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

5. Description of the Proposal

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

Change of use and subdivision of mixed A1/A3 to form an A3 unit at 51. Alteration to the shopfront and the installation of an extract duct from first floor to roof level on the rear elevation

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 If Yes, please state when the development was started:

Has the development been completed? ☐ Yes ☒ No

6. Condition(s) - Removal

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

Extend opening hours until 9:30pm

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

Variation of planning condition 4 of planning permission reference: 2015/3916/P, to allow customers to be on the premises between 08:00 to 21:30, on any day.

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: Mr Paul Littman Number: 35 Suffix: House name: Street: Oxen Park Avenue Locality: Town: Postcode: HA9 9SY	03/07/2017
Name: Mrs Judith Litman Number: 35 Suffix: House name: Street: Oxen Park Avenue Locality: Town: Postcode: HA9 9SY	03/07/2017
Name: Mr Liran Landau Number: 51 Suffix: House name: Street: Fairfax Road Locality: Town: Postcode: NW6 4EN	03/07/2017
Name: Mr Elad Esnafi Number: 51 Suffix: House name: Street: Fairfax Road Locality: Town: Postcode: NW6 4EN	03/07/2017
Name: Mr Or Golan Number: Suffix: House name: 51 Street: Fairfax Road Locality: Town: Postcode: NW6 4EN	03/07/2017

Title: Mr	First name: Joe	Surname: Henry
Person role: AGENT	Declaration date: 21/08/2017	<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

09/08/2017