

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

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:			Surname:	Metcalfe				
Company name:	Consolidated Devel	lopment Itd							
Street address:	c/o agent								
			Telephone numb	ber:					
			Mobile number:						
Town/City:			Fax number:						
Country:			Email address:						
Postcode:									
Are you an agent acting on behalf of the applicant?			🖲 Yes 🔵 N	No					

2. Agent Name	, Address and C	Contact Detail	S					
Title: Miss	First Name:	Freya			Surna	ame:	Turtle	
Company name:	Iceni Projects Ltd							
Street address:	Flitcroft House							
	114-116 Charing C	ross Road		Telephone numb	ber:	02036	6575031	
				Mobile number:				
Town/City:	London			Fax number:				
Country:				Email address:				
Postcode:	WC2H 0JR		fturtle@iceniprojects.com					

3. Site Addres	ss Details					
Full postal addre	ss of the site (including	full postcode whe	re available)	Description:		
House:	10	Suffix:				
House name:						
Street address:	Denmark Street					
Town/City:	LONDON					
Postcode:	WC2H 8LS					
	cation or a grid referen eted if postcode is not k					
Easting:	529883					
Northing:	181229					
4. Pre-applica	tion Advice					
Has assistance of	or prior advice been sou	ught from the local	authority about	t this application?	🔾 Yes 💿	No
5. Descriptior	of the Proposal					
Please provide a	description of the app	roved development	as shown on t	he decision letter:		
	t to front elevation; roo isting layout and the re r levels			nd lower ground		
Application refere	ence number:	2016/3847/L			Date of decision:	20/09/2016
Please state the Condition number	condition number(s) to er(s):	which this applicat	ion relates:			
4 and 5						
Has the develop	ment already started?	🔾 Yes 💿 N	0			
6. Discharge	of Condition(s)					
Please provide a	full description and/or	list of the materials	/details that are	e being submitted fo	r approval:	
see covering let				<u> </u>		
7. Part Discha	arge of Condition(s)				
Are you seeking	to discharge only part o	of a condition?			🔾 Yes 💿 No	
8. Site Visit						
Can the site be s	een from a public road	, public footpath, b	ridleway or oth	er public land?	🔾 Yes 💿 No	
If the planning au	uthority needs to make	an appointment to	carry out a site	visit, whom should	they contact? (Please select	only one)
The agent	O The applicant	Other per	son			

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

05/09/2017