

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:	C/O Agent			
Company name:	Hyjan Investments	Holdings						
Street address:	C/O Agent							
			Telephone numb	er:				
			Mobile number:					
Town/City:	LONDON		Fax number:					
Country:			Email address:					
Postcode:								
Are you an agent acting on behalf of the applicant?			🖲 Yes 🔾 N	lo				

2. Agent Name	, Address and C	Contact Details				
Title: Mr	First Name:	Alex		Surnar	ne:	Yearsley
Company name:	Future Planning an	d Development Ltd	]			
Street address:	2 Wardrobe Place	]				
			] Telephone numb	ber: 0	2079	9938196
			Mobile number:	0	7834	4561564
Town/City:	London		Fax number:			
Country:			Email address:			
Postcode:	EC4V 5AH		alex.yearsley@futurepd.co.uk			

3. Site Addres	ss Details					
Full postal addre	ess of the site (including	g full postcode	where available	) Description:		
House:	2	Suffix:				
House name:						
Street address:	Kingscroft Road					
Town/City:	LONDON					
Postcode:	NW2 3QG					
	cation or a grid referer eted if postcode is not					
Easting:	524559					
Northing:	184894					
4. Pre-applica	ation Advice					
Has assistance of	or prior advice been so	ought from the	local authority ab	pout this application?	🔾 Yes 💿	No
5. Description	n of the Proposal					
Please provide a	description of the app	proved develop	ment as shown o	on the decision letter:		
	ne ground and first-floo refuse/cycle stores in			oom self-contained flats, p	lus the retention of the exis	sting 1-bed flat on the 2nd floor
Application refer	·	2017/3287/			Date of decision:	18/08/2017
Please state the	condition number(s) to					
Condition number	er(s):					
	ment already started?	O Yes	No			
	ment alleady statted:	0 163				
6 Discharge	of Condition(s)					
o. Discharge	or condition(s)					
	· · · · · · · · · · · · · · · · · · ·	list of the mat	erials/details that	t are being submitted for a	pproval:	
Drawing No: 02	48 PL 23.					
7. Part Discha	arge of Condition	(S)				
Are you seeking	to discharge only part	of a condition	?		🔾 Yes 💿 No	
8. Site Visit						
Can the site be s	seen from a public road	d, public footpa	ath, bridleway or	other public land?	🖲 Yes 🕥 No	
If the planning a	uthority needs to make	an appointme	ent to carry out a	site visit, whom should the	ey contact? (Please select	only one)
The agent	The applicant	Other	er person			

## 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	1	Date	29/09/2017
true and accurate and any opinions given are the genuine opinions of the person(s) giving them.	Ŧ	Date	