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. Applic	ant Name	and Addre	ess		2. Agent	Name an	d Address		
Title:	Mr	First name:	Michael		Title:	Mr	First name:	David	
Last name:	Walton				Last name:	Gomersa	Ш		
Company (optional):					Company (optional):	eadstudio	4		
Unit:		House number: 8	7B Hous		Unit:		House number:	1	House suffix:
House name:					House name:				
Address 1:	Queens C	rescent			Address 1:	Victoria S	street		
Address 2:	Lower Be	size Park			Address 2:	Castlefiel	ds		
Address 3:					Address 3:				
Town:	London				Town:	Shrewsbu	ıry		
County:					County:				
Country:					Country:				
Postcode:	NW5 4E	U			Postcode:	SY1 2HS			
3. Descri	ption of t	he Proposa	ıl						
Please desc	cribe the pro	posed develo	pment, including	any change o	fuse:				
Replace r	ear sash wi	ndow with inw	ard opening french	windows					
	•		se already started	?	Yes	X No			
		late when buil ed (DD/MM/YY				(date mus	st be pre-appli	cation subr	nission)
	0.	•	e been completed	1?	Yes	X No			
		ate when the empleted: (DD	building, work /MM/YYYY):			(date mus	t be pre-applic	ation subm	nission)

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	ldress Details		5. Pre-application Advice
Please provi	de the full postal address of the application		Has assistance or prior advice been sought from the local authority about this application?
Unit:	House 87B House suffix		Yes X No
House name:			If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1:	Queens Crescent		application more efficiently). Pease tick if the full contact details are not
Address 2:	Lower Belsize Park		known, and then complete as much as possible:
Address 3:			Officer name:
Town:	London		
County:			Reference:
Postcode (optional):	NW5 4EU		
Description	of location or a grid reference. mpleted if postcode is not known):		Date (DD/MM/YYYY): (must be pre-application submission)
Easting:	528072 Northing: 1848	59	Details of pre-application advice received?
Description	:		
Top two f	loors of terraced house		
6. Pedestr	ian and Vehicle Access, Roads and Rig	htsof Way	7. Waste Storage and Collection
and the same of th	Itered vehicle access proposed ne public highway?	X No	Do the plans incorporate areas to store and aid the collection of waste? Yes X No
ls a new or a	Iltered pedestrian	<u>~</u>	
access prop	osed to or from	_	If Yes, please provide details:
the public h	ighway'? Yes	X No	
	y new public roads to be thin the site?	X No	
Are there an	y new public		
rights of wa	y to be provided	V No	
	jacent to the site? Yes	X No	
	osals require any diversions ments and/or		Have arrangements been made for the separate storage and
_	ights of way?	X No	collection of recyclable waste? Yes X No
détails on y	ered Yes to any of the above questions, ple our plans/drawings and state the reference	ase show of the plan	If Yes, please provide details:
(s)/drawing	<u> </u>		
	rity Employee / Member t to the Authority, I am: (a) a member of st	aff	Do any of these statements apply to you? Yes X No
viiii respec	(b) an elected mer	nber	A NO
	(c) related to a me (d) related to an el		•
If Yes, pleas	e provide details of the name, relationship		
	, , , , , , , , , , , , , , , , , , , ,		

9. Materials If applicable, please stat	te what ma	terials are to be used extern	nally. Include	e type, colour and name for	each material:		
	Existing (where ap	plicable)		Proposed		Not applicable	Don't Know
Walls						X	
Poof						X	
Windows	Painted t	timber sash		Painted timber inward of french windows	pening		
Doors						X	
Boundary treatments (e.g. fences, walls)						X	
Vehicle access and hard-standing						X	
Lighting						X	
Others (please specify)							
		rmation on submitted plan			nent? X Yes		No
Location and site plan	s ns 305 02A lans 305 40	he plan(s)/drawing(s)/design, Rear/ West Elevation 305 DA, Rear/ West Elevation 30			otion at 1:20 305 48 05 40B		
10. Vehide Parkin	-						
		the existing and proposed Total		n-site parking spaces: I proposed (including	Difference		
Type of Vehic Cars	ie	Existing		spaces retained)	in spaces		
Light goods vehi public carrier veh	cles/	NA					
public carrier veh Motorcycles							$\overline{}$
Disability space							\dashv
Cycle spaces							-
Other (e.g. Bu							\dashv
Other (e.g. Bu							$\overline{}$

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
X 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.)
Septictank Other	Yes X No
Package treatment plant	If Yes, you will need to submit a Flood Flsk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes X No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes X 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 X 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	Dwelling
likelihood that any important biodiversity or geological 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 likelihood of the following being affected adversely or conserved	Is the site currently vacant? Yes X No
and enhanced within the application site, or on land adjacent to	If Yes, please describe the last use of the site:
or near the application site?	
a) Protected and priority species:	
Yes, on the development site	
Yes, on land adjacent to or near the proposed development	When did this use end (if known)?
X No	DDÌMM/YYÝY (date where known may be approximate)
b) Designated sites, important habitats or other biodiversity features:	Does the proposal involve any of the following?
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.
Yes, on land adjacent to or near the proposed development	Land which is known to be contaminated? Yes X No
X No	Land where contamination is
c) Features of geological conservation importance:	suspected for all or part of the site? Yes X No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development X No	be particularly vulnerable to the presence of contamination?
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes X No	Does the proposal involve the need to dispose of trade effluents or waste? Yes X No
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal
proposed development site that could influence the development or might be important as part	of trade effluents or waste
of the local landscape character? Yes X 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 185837: Trees in relation to	
design, demolition and construction - Recommendations'.	

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Market Housing Not know Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Social Pented Not know Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Intermediate Not know Not know Houses Flats and maisonettes Houses Flats and maisonettes	Totals	2 Sharper 2 Shar	3 D+C+ Der of 3	4+	ooms Unknown P+f+g)= Ooms Unknown	Total	Market Housing Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Social Rented Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios	Not known	1 otals	2 (a+t	3 b+c+	4+	e+f+g)= ooms Unknown	Tota a b c d e f g E
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Bedsit/studios	Totals	Numb	per of	Bedro 4+	ooms	Total a b c d e f	Bedsit/studios Unknown type Social Pented Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing	Not known		Numl	ber of	f Bedro	ooms	f g E Tota
Unknown type Social Pented Not know Houses Hats and maisonettes Univerwork units Guster flats Sheltered housing Bedsit/studios Unknown type Intermediate Not know Houses Hats and maisonettes	Totals	Numb	per of	Bedro 4+	ooms	Total a b c d e f	Social Rented Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing	Not known		Numl	ber of	f Bedro	ooms	Tota a b
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know	Totals	Numb	per of	Bedro 4+	ooms	Total a b c d e f	Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing	Not known		Numl	ber of	f Bedro	ooms	Tota a b
know	Totals	2	3	4+		a b c d e f	Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing	known		_		_		a b
Houses Care Renow Renow	Totals				Unknown	b c d e	Houses Flats and maisonettes Live-work units Cluster flats Sheltered housing		1	2	3	4+	Unknown	b
Rats and maisonettes Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Intermediate Not know Houses Flats and maisonettes		3 (a + t)+ C+			b c d e	Rats and maisonettes Live-work units Cluster flats Sheltered housing							b
Live-work units Cluster flats Sheltered housing Bedsit/studios Unknown type Intermediate Not know Houses Flats and maisonettes		s (a + b)+ c+			c d e f	Live-work units Cluster flats Sheltered housing							1007
Cluster flats		s (a + b	0+C+			d e f	Cluster flats Sheltered housing							(3)
Sheltered housing Bedsit/studios Unknown type Intermediate Houses Hats and maisonettes		s (a + b)+ C+			e f	Sheltered housing			-	-		1	
Bedsit/studios		s (a + b)+ C+			f						1		d
Unknown type Intermediate Not know Houses Flats and maisonettes		s (a + b) + C+			g	Beasit/studios			+	-	+		е
Intermediate Not know Houses □ Rats and maisonettes □		(a + b) + C+			Q	I halmanium kuma			-		-		I
Houses				d+e	(+f+g)=	В	Unknown type	To	otals	(a + t) + C +	 ⊦d+e	e + f + g) =	g F
Houses	_					T-4-1						<u> </u>		T-1-
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						а	Houses							а
Live-work units						b	Flats and maisonettes							b
						C	Live-work units							С
Guster flats □						d	Cluster flats							d
Sheltered housing						е	Sheltered housing							е
Bedsit/studios						f	Bedsit/studios							f
Unknown type						g	Unknown type							g
,	Totals	(a + b) + C+	d+e	+ f + g) =	C		To	otals	(a + b) + C+	-d+e	e+f+g)=	G
Key worker Not				_	ooms	Total	Key worker	Not			ber of	1	ooms	Tota
KIIOW	1	2	3	4+	Unknown	_		known	1	2	3	4+	Unknown	-
Houses						a	Houses					+		a
Hats and maisonettes						b	Hats and maisonettes					+		b
Live-work units	+		\vdash			C	Live-work units			-	_	\vdash		C
Chaltered beviews						d	Chaltered bassing			_		\vdash		d
Sheltered housing						е	Sheltered housing			_	_	\vdash		е
Bedsit/studios	-					Ť	Bedsit/studios			_		_		1
Unknown type	T-4 '	. /				g	Unknown type			<u> </u>			()	g
	otals	(a + b) + C+	a+e	(+f+g)=	D		To	otals	(a + b) + C +	-a+e	g+f+g)=	Н

18. All	Types of Developme	ent: l	Non-resident	ial Floorspa	ce		
Doesyo	ur proposal involve the lo	ss, gai	in or change of u	se of non-resid	ential floorsp	pace? Yes	No
If you	u have answered Yes to th						
Us	se class/type of use	Not applicable	Existing gross internal floorspace (square metres)	Gross internal to be lost by use or den (square n	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)
A1	Shops						
	Net tradable area:						
A2	Financial and professional services						
A3	Restaurants and cafes						
A4	Drinking establishments						
A5	Hot food takeaways						
B1 (a)	Office (other than A2)						
B1 (b)	Research and development						
B1 (c)	Light industrial						
B2	General industrial						
B8	Storage or distribution						
C1	Hotels and halls of residence						
C2	Residential institutions						
D1	Non-residential institutions						
D2	Assembly and leisure						
OTHER							
Please Specify							
- speemy	Total						
In ad	dition, for hotels, resident	ial ins	titutions and ho	stels, please add	ditionally inc	dicate the loss or gain of	rooms
Use class	Type of use Not applicable	Existi	ng roomsto be l of use or dem			s proposed (including langes of use)	Net additional rooms
СІ	Hotels						
C2	Residential Institutions						
OTHER							
Please Specify							
19. Em	ployment						
	omplete the following info	ormat	ion regarding er	nployees:			
			Full-time	Part-	time		al full-time quivalent
	isting employees						
Pro	posed employees					<u> </u>	
20. Ho	urs of Opening						
	se state the hours of open	ing fo	r each non-resid	ential use prop	osed:		
	Use Me	onday	to Friday	Saturda	y	Sunday and Bank Holidays	Not known
				_			
lacksquare							
21. Site	e Area						
Please st	ate the site area in hectar	es (ha)				
			-			,	5Date:: 2013-01-09 #\$ \$Pevision: 4684 \$

22. Industrial or Commercial Proce	sses	and Machine	ry			
Hease describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Hease type of machinery which may be installed or	cts in	cluding dethe				
Is the proposal a waste management develo	pme	nt? Yes	☐ No			
If the answer is Yes, please complete the foll	•	_				
	Not applicable	The total capa including engir allowance for tonnes if soli	acity of the void in leering surcharge cover or restoration d waste or litres if	and making on material (d	throughput in to	onnes
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						
Any combined mechanical, biological and/ or thermal treatment (MBT)						
Sewage treatment works						
Other treatment Recycling facilities construction, demolition and excavation waste						
Storage of waste						
Other waste management						
Other developments						
Please provide the maximum annual operat	ional	throughput of th	e following waste	streams:		
Municipal						
Construction, demolition and e	xcava	ation				
Commercial and industr	rial					
Hazardous						
If this is a landfill application you will need t planning authority should make clear what	o pro infor	vide further infor mation it requires	mation before you on its website.	ur applicatio	n can be determined. Your v	waste
23. Hazardous Substances						
Does the proposal involve the use or storage the following materials in the quantities stat			X No	Not app	olicable	
If Yes, please provide the amount of each su			 d:			
Acrylonitrile (tonnes)		hylene oxide (to			Phosgene (tonnes)	
Ammonia (tonnes)	Hyd	rogen cyanide (to	nnes)		Sulphur dioxide (tonnes)	
Bromine (tonnes)		Liquid oxygen (to	nnes)		Hour (tonnes)	
Chlorine (tonnes)	quid	oetroleum gas (to	nnes)	Re	fined white sugar (tonnes)	
Other:			Other:			
Amount (tonnes):			Amount (ton	nnes):		

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Town and Country Planning (Develop certify/The applicant certifies that on the day, wher (owner is a person with a freehold interest hich the application relates, and that none of OTE: You should sign Certificate B, C or D, a pplication relates but the land is, or is part of "owner" is a person with a freehold interest or less	sehold interest with at least 7 years left to run	cept myself/ the applicant was the any part of the land or building to of, an agricultural holding** Id or building to which the
	reference to the definition of "agricultural tenant" in s	
Signed - Applicant:	Or signed - Agent:	Date (DD/MM/YYYY):
Town and Country Planning (Developm l certify/ The applicant certifies that I have/the 21 days before the date of this application, was application relates. ""owner" is a person with a freehold interest or lead ""agricultural tenant" has the meaning given in:	section 65(8) of the Town and Country Planning Act 19	else (as listed below) who, on the day rt of the land or building to which this
Name of Owner / Agricultural Tenant	Address	Date Notice Served
Camden Council own freehold		4 August 2017
Signed - Applicant:	Or signed - Agents	Date (DD/MM/YYYY):
	David Gomersa	29/09/2017

Igned - Applicant:	Ors	signed - Agen		Date (DD/MM/YYYY):	
	Da	avid Gomersa		29/	09/2017	(date cannot be pre-application)
27. Applicant Contact Deta	ails	1	28. Agent Co	ontact Details		\equiv
Telephone numbers			Telephone num			
Country code: National numbe		Extension number:	Country code:	National number		Extension number:
Transmaring	l.	Juniber.	Country soud.	TVallOTISI TIUTTIDEI		Tidillog.
Country code: Mobile number	(optional):		Country code:	Mobile number (optional):	
Country code: Fax number (opt	tional):	- 	Country code:	Fax number (opt	ional):	
Email address (optional):			Email address (o	optional):		
		لــــــا				
29. Site Visit						1
Can the site be seen from a public			rother public land	? Yes	X No	
If the planning authority needs to out a site visit, whom should they	make an appointm contact? (Please sel	ent to carry ect only one)	☐ Agent	X Applicant		lifferent from the
If Other has been selected, please					— agent/app	olicant's details)
Contact name: Di Walton			Telephone num	ber:		
DI Wakon			L			
						The state of the s
Email address:						
Email address:						
Email address:						
Email address:						
Email address:						
Email address:						
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Email address:						3
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