

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

Householder Application for Planning Permission for works or extension to a dwelling. Town and Country Planning 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 Na	ame, Address a	nd Contact Details							
Title:	First Name:	Evgenia	Su	rname: Konopleva					
Company name:									
Street address:	26, West Hill Park								
			Telephone number:						
			Mobile number:						
Town/City:	LONDON		Fax number:						
Country:			Email address:						
Postcode:	N6 6ND								
Are you an agent a	Are you an agent acting on behalf of the applicant? Yes No								
2. Agent Name	, Address and C	Contact Details							
Title: Miss	First Name:	Nadia	Su	rname: Gobova					
Company name:									
Street address:	26 West Hill Park								
Sileet address.	20 West Hill Faik		Talankana numban	07544040000					
			Telephone number:	07541219229					
			Mobile number:						
Town/City:	London		Fax number:						
Country:			Email address:	Email address:					
Postcode:	N6 6ND		ngobova@yahoo.cor	ngobova@yahoo.com					
3. Description	of Proposed Wo	orks							
	e proposed works:								
The proposed works consist of refurbishment and modernisation of the existing house, including construction of lower ground floor extensions at the front and rear of the house with step-free direct access.									
Has the work alrea		○ Yes ●	No						
without planning p		○ Yes ●	INO						

4. Site Addres	ss Details							
Full postal addre	ess of the site (including full po	stcode where available)	Description:					
House:	26 Suffix:							
House name:								
Street address:	West Hill Park							
Town/City:	LONDON							
Postcode:	N6 6ND							
December of la								
	ocation or a grid reference eted if postcode is not known):	:						
Easting:	527904							
Northing:	186846							
5. Pedestrian	and Vehicle Access, Ro	oads and Rights of V	Nay					
				Do the	proposala			
Is a new or alterovehicle access		Is a new or altered pedestrian access		require	proposals any diversions,			
proposed to or fr		proposed to or from the public highway?	e Ves 💿 No		uishment and/or on of public rights		Yes 💿	No
the public highw	ay.	pablio riigriway .		way?				
6. Pre-applica	ation Advice							
Has assistance	or prior advice been sought fro	om the legal authority abou	ut this application?		Yes	No		
	omplete the following information			aln the authori			ation more	efficiently):
Officer name:	implete the following information	on about the advice you w	rere giveri (uns wiii ne	eip ille adilloli	ty to dear with th	із арріісс	ation more	emolerity).
Title: Mr	First name: Johr	า		Surname:	Diver			
Reference:	2016/3912/PRE	<u> </u>			Divoi			
Date (DD/MM/Y)		ust be pre-application sub	mission)					
	e-application advice received:	ast be pre application sub-	mission					
7. Trees and	Hedges							
	•							
Are there any tre	ees or hedges on your own pro of your proposed development	perty or on adjoining prop?	perties which are with	nin	(Yes	No	
	ark their position on a scaled p		ce number of any pla	ns or drawing	s:			
Attached arboric	cultural report and survey							
Will any trees or	hedges need to be removed of	or pruned in order to carry	out your proposal?		(Yes	No	
8. Parking								
Will the propose	d works affect existing car par	king arrangements?			(Yes	○ No	
If Yes, please de	escribe:							

8. Parking
Please refer to the attached CMP
9. Authority Employee/Member
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member
10. Site Visit
Can the site be seen from a public road, public footpath, bridleway or other public land?
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
11. Materials
Please state what materials (including type, colour and name) are to be used externally (if applicable): Roof - description: Description of existing materials and finishes:
Description of <i>proposed</i> materials and finishes:
Green roof
Walls - description: Description of existing materials and finishes:
Brick
Description of <i>proposed</i> materials and finishes:
Brick to match existing
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? © Yes © No If Yes, please state references for the plan(s)/drawing(s)/design and access statement:
001 Location plan and block plan 01-B Existing Lower ground floor 02-B Existing ground floor plan and first floor plan 03- B Existing Elevations 04-B Proposed Sections and proposed Lower ground floor plan 05-B Proposed Elevations 06-B Existing and proposed landscape plans 07-B Visualisation Existing condition view 1 08-B Visualisation Existing condition view 2 09-B Visualisation Proposed view 1 10-B Visualisation Proposed view 2 11-B Shadow study 12-B Proposed materials
Photos of existing condition of the house BIA Draft CMP including Transport Assessment Arboricultural Report Landscaping & SUDS report Topography survey

12. C	ertificates	(Certification	ate A)								
		Town an	d Country Planning (Dev		cate of Ownership - Ce		Order 2015	Certificate	under Arti	icle 14	
I certif	v/The applicant		it on the day 21 days before	•	•						
freeho	old interest or lea	sehold inte	rest with at least 7 years le	left to run) of a	ny part of the land to wh	ich the appli	cation relate	es, and that	none of the	e land to which the applica	
relates	s is, or is part of,	an agricultu	ural holding ("agricultural I	holding" has ti	ne meaning given by ref	erence to the	e definition o	of "agricultur	al tenant" ii ———————————————————————————————————	n section 65(8) of the Act).	
Title:	Title: First name: Nadia				Surnar	ne: Gob	ova				
Perso	Person role:		AGENT De		Declaration date:	08/09/2017		✓ Declaration made			
13. C	eclaration										
	, ,, ,		permission/consent as				0 1				_
			nation. I/we confirm tha				stated are	~	Date	08/09/2017	
true and accurate and any opinions given are the genuine opinions of the person(s) giving them.											