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Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

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.

1. Applicant Name and Address

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

2. Agent Name and Address

	Mr First name: MITCHELL	Title:	Mr First name: HASAN
Last name:	TILLMAN	Last name:	ARIKOGLU
Company (optional):	PUB & ROOMS (LB) LTD	Company (optional):	HASANARIKOGEU RIBA ARCHITECT
Unit:	House number: 72 House suffix:	Unit:	House number: 39 House suffix:
House name:	THE GRAFTON ARMS	House name:	
Address 1:	GRAFTON WAY	Address 1:	CHEPSTOW ROAD
Address 2:	/	Address 2:	
Address 3:		Address 3:	
Town:	LONDON	Town:	LONDON
County:		County:	
Country:	UK	Country:	UK
Postcode:	W1T5DU	Postcode:	W25BP
	ion of the Proposal		
Please describ	pe the proposed development, including any change of		
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Has the buildir	OOR WITH A MANSARD RE	00F;	
Has the buildir If Yes, please st work or use wo	ag, work or change of use already started? Tate the date when building, Erre started (DD/MM/YYYY): G, work or change of use been completed?	00F;	No
Has the buildir if Yes, please st work or use wo las the building if Yes, please st	ag, work or change of use already started? Tate the date when building, ere started (DD/MM/YYYY):	Yes [No (date must be pre-application submission)
Has the buildir if Yes, please st work or use wo las the building if Yes, please st	ag, work or change of use already started? The date when building, ere started (DD/MM/YYYY): G, work or change of use been completed? The date when the building, work	Yes [No (date must be pre-application submission) No

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local
Unit: House number: 72 House suffix:	authority about this application? Yes No
House name: THE GRAFTON ARMS	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: GRAFTON WAY	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	
County:	Reference:
Postcode (optional): W1T5DU	72 GRAFTON WAY PLANNING APP.
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): $O2/10/2017$ (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	REP. NO 03600 CAMBEN PLANNING
	DEPT. IT WAS NOT POSSIBLE TO SEE
	A PLANNING OFFICER BUT ADVISED
	ON ATEL MESSAGE THAT A FULL
	PLANNING APPLICATION WAS REQUIRED
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway?	Do the plans incorporate areas to store and aid the collection of waste?
ls a new or altered pedestrian	If Yes, please provide details:
access proposed to or from	ii resypicase provide details.
	The state of the s
the public highway? Yes No	
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the public highway? Are there any new public roads to be provided within the site? Are there any new public rights of way to be provided within or adjacent to the site? Yes No Yes No	
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	Existing (where applicable)	Propose	ed		Not applicable	Don't Know
Walls	BRICK	BRI	CK TO PART	T WALLS		
Roof	SLATE PITCHED ROO	OF SLA WITH ROOF	TE MANSA I A FLAT GRE TO FALLS, LEA	RD ROOF PDARKGREY DEVASHINGS		
Windows	EXISTING 3rd FLOOR W ARETIMBER SAJA WIND	JINDOWS PRODUCES ROOM	PEXTENSION PEXTENSION COUND TIMBER	LOOR MANJAR , LEAD	>	
Doors					Ø	
Boundary treatments (e.g. fences, walls)	BRICK PARTY WALLS	BRI	CK PARTY	WALLS	.[-]	
Vehicle access and hard-standing					Ø	
Lighting					Ø	
Others (please specify)						
Are you supplying addi	tional information on submitted plan(s)/	drawing(s)/design	and access statement	Yes		No
If Yes, please state refer	ences for the plan(s)/drawing(s)/design a	and access stateme	nt:		· ·	
PROPOSED ! P. SITE PHOTOS : F	S: L.OI, EXOI, EXO2, EXO EXIO, II OI, P.OZ, P.O3, P.O4, P.O5, 21 + P2	, P. 06, P. 07,	P.08 / DESIGN	tx 07, Ex 09	s,E) ATU	nent
0. Vehicle Parking						
Please provide infor	mation on the existing and proposed nur					
Type of Vehicle	e Total Existing	Total propose spaces re		Difference in spaces		Approximation and a state of the state of th
Cars	NOHE				,	
Light goods vehic public carrier vehi						
Motorcycles	NONE				ettiti etti taimini et yydysyyyyyyy	
Disability space	S NONE		7			
Cycle spaces	NONE			,		
Other (e.g. Bus)	HONE					
Other (e.g. Bus)	NONE					

11. Foul Sewage	12. Assessment of Flood Risk
Please state how foul sewage is to be disposed of: Mains sewer Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local
Santistank Other	planning authority requirements for information as necessary.)
Septic tank Other	Yes No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere?
THE PROPOSED BATHROOMS DRAINAGE	How will surface water be disposed of?
WILL BE CONNECTED TO THE EXISTING	Sustainable drainage system Existing watercourse
BATHROOMS AT 3rd PLR. THE RAINWATER	Soakaway Pond/lake
WILL BE DISPOSED FROM THE EXISTING RW DRAINAGE, P.02, PO4(GEE ALSO PHOTO PZ)	Main sewer
13. Biodiversity and Geological Conservation	14. Existing Use
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:
notes for further information on when there is a reasonable likelihood that any important biodiversity or geological	PUB WITH ANCILLARY ROOMS.
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	Is the site currently vacant? Yes No
likelihood of the following being affected adversely or conserved 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)?
No	DD/MM/YYYY
b) Designated sites, important habitats or other biodiversity features:	(date where known may be approximate) Does the proposal involve any of the following?
Yes, on the development site Yes, on land adjacent to or near the proposed development	If yes, you will need to submit an appropriate contamination assessment with your application.
No	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance: Yes, on the development site	Land where contamination is suspected for all or part of the site? Yes No
Yes, on land adjacent to or near the proposed development	A proposed use that would
No No	be particularly vulnerable to the presence of contamination? Yes No.
15. Trees and Hedges	16. Trade Effluent
Are there trees or hedges on the proposed development site? Yes No	Does the proposal involve the need to dispose of trade effluents or waste? Yes No
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
development or might be important as part of the local landscape character? Yes 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 'BS5837: Trees in relation to design, demolition and construction - Recommendations'.	

Does your proposal in If Yes, please complet	nits (Ir clude the details	ne gai	in. lo	s or c	hand	e of use of	resider low:	ntial units?	V.	Vo					**************************************
	Propos	sed I	Hou	sing		General National Parts and earliered Health Association (Health Association)			Existi	ing l	Hous	ing			
Market Housing	Not		7	-	7	rooms	Total	Market	Not					rooms	Tota
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Live-work units				 	-			Flats and maisonettes			-			/	-
Cluster flats								Live-work units			-		1		
Sheltered housing				-				Cluster flats				<u> </u>	<u> </u>		-
Bedsit/studios				ļ	<u> </u>			Sheltered housing			-	/			-
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## you have answered Yes to the question above please add details in the following table: Use class/type of use			-		Non-reside in or change o		rspace -residential floor	space?	No
A1	If yo	u have answ	ered Yes to tl	ne qu	estion above _I	olease add d	etails in the follo	wing table:	
Net tradable area:				licable	·	ss Gross in to be lo	ternal floorspace ost by change of or demolition	Total gross internal floorspace proposed (including change o	d internal floorspace f following development
A2 Financial and professional services	A1	Sh	ops						
A3 Restaurants and cafes		Net trad	able area:				Michael March (Improved Program and America Andrewski) (Inc. 1222 Street Astronomical Inc. 1222		
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 B3 Storage or distribution C1 Hotels and halfs C2 Residential institutions D1 Non-residential institutions D2 Assembly and lelsure C3 Pelsembly and lesure C4 Total C5 Total C5 Total C6 Total C7 Total C7 Total C8 Type of use A53.03 m² A53.00 m² A53.03 m² A53.00 m² A53.03	A2						and gain and a shall deal the deal of the shall distribuse the contract of the same and the same and the same a	300	
A5 Hot food takeaways	А3	Restauran	ts and cafes						
B1 (a) Office (other than A2)	A4	Drinking es	tablishments						
B1 (b) Research and development	A5	Hot food	takeaways						
B1 (c) Light industrial	B1 (a)	Office (oth	er than A2)						
B1 (c) Light industrial	B1 (b)								
B8 Storage or distribution	B1 (c)								
C1 Hotels and halls of residence C2 Residental institutions D1 Non-residential institutions D2 Assembly and leisure D3 Assembly and leisure D4 Total D53.03 m² T3.00 m² 531.03 m² Total D53.03 m² T3.00 m² 531.03 m² Total D64 Type of use applicable of use or demolition C1 Hotels C2 Residential institutions C1 Hotels C2 Residential D65 Residential D76 DTHER D77 DTHER D78 DTHER D79 DTHER D79 DEMONSTRIP DEMONS	B2	General	industrial						
C2 Residential institutions	B8	1						**************************************	
C2 Residential institutions	C1						teri kini apatulukkin utakin kini tikun kitoonin kitoonin tara milimmaa araan ay ay oraanisi samuusi		
Institutions Inst	C2								
D2 Assembly and leisure	D1								
Please Specify Total 453.03 m² Total 453.03 m² Total 453.03 m² In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use PuB with Rooms Total 453.03 m² Total 73.00 m² 531.03 m² Total maddition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Total rooms Total rooms proposed (including changes of use) Net additional rooms Net additional rooms Net additional rooms Net additional rooms Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees 10 Proposed employees Output Full-time Part-time Total full-time equivalent Sunday and Bank Holidays Not known	D2								
Total 453.03m² 73.00m² 531.03m² In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use	OTHER								
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use class Type of use Potential Existing rooms to be lost by change of use or demolition C1 Hotels		PUB WIT	+ ROOMS		453.03 n	12	/	73.00 m²	531.03 m²
In addition, for hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms Use class Type of use Potential Existing rooms to be lost by change of use or demolition C1 Hotels		То	tal		453.03m	,2	/	73,00 m²	531,03 m ²
C1 Hotels	In ad	dition, for ho	tels, resident	ial ins	titutions and I	hostels, plea:	se additionally in		
C2 Residential Institutions	class		Not applicable	Existii	ng rooms to b of use or de	e lost by cha molition			Net additional rooms
Institutions		. 1			North Address of the American State of the A				
Please Specify 19. Employment Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees O O OPPOSE Existing employees Proposed employees O O OPPOSE OPPOSE OPPOSE OF OPPOSE OF OPPOSE OPP				····	***************************************	N/A			
Specify 19. Employment Please complete the following information regarding employees: Full-time Part-time Total full-time equivalent Existing employees Proposed employees O Hours of Opening f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known									
Please complete the following information regarding employees: Full-time									
Existing employees	9. Em	ployment							
Existing employees	Please co	mplete the f	ollowing info	rmati	on regarding	employees:			
Existing employees Proposed employees O O O O O O O O O O O O O O O O O O			distribution of the second		Full-time		Part-time	F	
Co. Hours of Opening If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known				Į.	0				
f known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed: Use Monday to Friday Saturday Sunday and Bank Holidays Not known	Prop	posed employ	/ees		0				
Use Monday to Friday Saturday Sunday and Bank Holidays Not known	.0. Hou	irs of Oper	ning						
Bank Holidays Not known	f known,	please state	the hours of	openi	ng (e.g. 15:30) for each no	n-residential use		
		Use	Мо	nday	to Friday	Sat	urday	Sunday and Bank Holidays	Not known
	PUB &	* ROOMS	1 . 0	0 -	23.00	11.00 -	-23.00		
						-		· · · · · · · · · · · · · · · · · · ·	<u></u>

Please state the site area in hectares (ha) 0.0079 (79.53 m²) AT BASEMENT LEVEL: 135.50 m²

SDate: 2015-04-02 #5 SRevision: 6149 \$

22. Industrial or Commercial Proce	esses	and Machinery	
Please describe the activities and processes be carried out on the site and the end produ plant, ventilation or air conditioning. Please type of machinery which may be installed on	icts ir inclu	cluding de the	
Is the proposal a waste management develo	pme	nt? Yes No	
If the answer is Yes, please complete the foll	lowin	g table:	
	Not applicable	The total capacity of the void in cubic metres, including engineering surcharge and making no allowance for cover or restoration material (or tonnes if solid waste or litres if liquid waste)	Maximum annual operational throughput in tonnes (or litres if liquid waste)
Inert landfill			
Non-hazardous landfill			
Hazardous landfill			
Energy from waste incineration			
Other incineration	П		
Landfill gas generation plant			
Pyrolysis/gasification		/	
Metal recycling site			
Transfer stations		A I I A	
Material recovery/recycling facilities (MRFs)		NI'	
Household civic amenity sites	H		
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	\overline{A}		
Please provide the maximum annual operation	onal :	hroughput of the following waste streams:	
Municipal			
Construction, demolition and ex	xcava	tion	
Commercial and industri	ial		
Hazárdous			
If this is a landfill application you will need to planning authority should make clear what i	prov nforn	ride further information before your application ca nation it requires on its website.	n be determined. Your waste
23. Hazardous Substances	New contradiction		
Does the proposal involve the use or storage the following materials in the quantities state			ble
If Yes, please provide the amount of each sub	stan	te that is involved:	
Acrylonitrile (tonnes)	Et	hylene oxide (tonnes)	Phosgene (tonnes)
Ammonia (tonnes)	Hydro	ogen cyanide (tonnes) Sul	phur dioxide (tonnes)
Bromine (tonnes)	L	quid oxygen (tonnes)	Flour (tonnes)
Chlorine (tonnes) Liq	uid p	etroleum gas (tonnes) Refined	d white sugar (tonnes)
Other:		Other:	
Amount (tonnes):		Amount (tonnes):	

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A** Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding* NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 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* and/or agricultural tenant** of any part of the land or building to which this application relates. *'"owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Name of Owner / Agricultural Tenant Date Notice Served ATTN: Mr. RICHARD DOFFMAN 9 WHITE LION STREET LONDON N1 9PD 07,11,2017 PEARLA LOUTTS LTD. BY FUST Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):

06.11,2017

(34 O			
24. Ownership Certificates and A			
 Neither Certificate A or B can be is All reasonable steps have been ta the land or building, or of a part o "owner" is a person with a freehold interest 	ken to find out the names and addresse of it, but I have/ the applicant has been u tor leasehold interest with at least 7 years	ngland) Order 2015 Certificate s of the other owners* and/or ag nable to do so.	
** "agricultural tenant" has the meaning give	en in section 65(8) of the Town and Count	ry Planning Act 1990	
The steps taken were:			
Name of Owner / Agricultural Tenant	Address		Date Notice Served
	P. Carlotte and Car		
Notice of the application has been publish	ned in the following newspaper	On the following date (whic	h must not be earlier
(circulating in the area where the land is si	ituated):	than 21 days before the date	of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY):
 Certify/ The applicant certifies that: Certificate A cannot be issued for the All reasonable steps have been taken 	en to find out the names and addresses vner* and/or agricultural tenant** of an ole to do so.	of everyone else who, on the day part of the land to which this a	u 21 days hoforo tho
The steps taken were:		, , raming rec 1990	
Notice of the application has been publishe (circulating in the area where the land is sit	ed in the following newspaper uated):	On the following date (which than 21 days before the date	n must not be earlier of the application):
Signed - Applicant:	Or signed - Agent:		Date (DD/MM/YYYY);

25. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority (LPA) has been submitted.	valid. It will not be considered valid until all information required by
The original and 3 copies* of a completed and dated application form:	The correct fee: $385-00$
The original and 3 copies* of the plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:	The original and 3 copies* of a design and access statement, if required (see help text and guidance notes for details): The original and 3 copies* of the completed, dated
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:	Ownership Certificate (A, B, C or D – as applicable) and Article 14 Certificate (Agricultural Holdings):
*National legislation specifies that the applicant must provide the ori total of four copies), unless the application is submitted electronically LPAs may also accept supporting documents in electronic format by You can check your LPA's website for information or contact their pla	y or, the LPA indicate that a smaller number of copies is required. post (for example, on a CD, DVD or USB memory stick)
26. Declaration I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	nis form and the accompanying plans/drawings and additional facts stated are true and accurate and any opinions given are the
Signed - Applicant: Or signed - Agent:	Date (DD/MM/YYYY):
H, MKOZ	
27. Applicant Contact Details	28. Agent Contact Details
27. Applicant Contact Details Telephone numbers	
	28. Agent Contact Details Telephone numbers Country code: National number: Extension number:
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Telephone numbers Country code: National number: Country code: Mobile number (optional): 7973322448 Country code: Fax number (optional): Email address (optional): Email address (optional): Mitch Ofrorop. W. W. 29. Site Visit Can the site be seen from a public road, public footpath, bridleway or If the planning authority needs to make an appointment to carry	Telephone numbers Country code: National number: Country code: Mobile number (optional): 7974 231966 Country code: Fax number (optional): Email address (optional): Email address (optional): No other public land? Yes No
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): 7973322449 Country code: Fax number (optional): Email address (optional): Email address (optional): 29. Site Visit Can the site be seen from a public road, public footpath, bridleway on the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	Telephone numbers Country code: National number: Country code: Mobile number (optional): 7974 231966 Country code: Fax number (optional): Email address (optional): Email address (optional): Agent Applicant Other (if different from the

Email address: