

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 Name, Address and Contact Details								
Title: Ms	First Name:	Veronica		Su	ırname: Deacon			
Company name:								
Street address:	37 Inverness Stree	t						
	Camden			Telephone number:				
				Mobile number:				
Town/City:	London			Fax number:				
Country:				Email address:				
Postcode:	NW1 7HB							
Are you an agent a	Are you an agent acting on behalf of the applicant?							
2. Agent Name	, Address and (Contact Deta	ails					
Tido. Mr.	First Name:	Daniel		c.				
Title: Mr	First Name:	Daniel			ırname: Curtin			
Company name:								
Street address:	50a Leigham Vale							
				Telephone number:	07876064909			
				Mobile number:				
Town/City:	London			Fax number:				
Country:				Email address:				
Postcode:	SW16 2JQ			dancurtin.archi@gmail.com				
				<u> </u>				
3. Description	of Proposed Wo	orks						
B								
Please describe the proposed works: Retrospective permission for the installation of frosted safety glass balustrade to existing roof terrace								
Inchrospective permission for the installation of nosted safety glass baldstrade to existing foot terrace								
Has the work alrea			Yes Q No		Yes, please state when e works were started:	11/10/2017		
Has the work already been completed without planning permission? Yes No					Yes, please state the date when e works were completed:	18/10/2017		

4. Site Addres	ss Details				
Full postal addre	ss of the site (including full pos	tcode where available)	Description:		
House:	37 Suffix:				
House name:					
Street address:	Inverness Street				
Town/City:	LONDON				
Postcode:	NW1 7HB				
	cation or a grid reference sted if postcode is not known):				
Easting:	528727				
Northing:	183856				
5. Pedestrian	and Vehicle Access, Ro	ads and Rights of V	Vay		
Is a new or altere		Is a new or altered	•	Do the proposals require any diversion	ne.
vehicle access proposed to or from the public highwa		pedestrian access proposed to or from the public highway?	○ Yes ● No	extinguishment and/ccreation of public right way?	or 🔘 Yes 🍥 No
6. Pre-applica	tion Advice				
Has assistance o	or prior advice been sought fror	n the local authority abou	t this application?	☐ Yes .	No
7. Trees and I	Hadnas				
7. Trees and I	leages				
	es or hedges on your own prop f your proposed development?		erties which are within		◯ Yes ◉ No
Will any trees or	hedges need to be removed or	pruned in order to carry	out your proposal?		◯ Yes ◉ No
0.0.11					
8. Parking					
Will the proposed	d works affect existing car park	ing arrangements?			◯ Yes ⊚ No
9. Authority E	mployee/Member				
(a) a m (b) an e (c) relat	ne Authority, I am: ember of staff elected member ted to a member of staff ted to an elected member	Do any of th	ese statements apply to y	ou?	◯ Yes ◉ No
10. Site Visit					
Can the site be s	een from a public road, public	footpath, bridleway or oth	er public land?	◯ Yes ⊚ No)

10. Site Visit								
If the planning aut	hority needs to m	ake an appointme	nt to carry out a	site visit whom sh	ould they cor	ntact? (Please se	lect only o	ne)
The agent	The applications		r person	one viole, whom or	iodia ilioy ool	11001. (1 10000 00	loot offing of	
g The agent	O THE applica	ant g Otne	i person					
44.88.4.1.1								
11. Materials								
Please state what	materials (includi	ing type, colour an	d name) are to b	e used externally	(if applicable)):		
OTHER - descrip	tion:							
Type of other mat	erial: Glass B	alustrade						
Description of exis	sting materials an	d finishes:						
None								
Description of prop	oosed materials a	and finishes:						
Frosted Security	Glass - Toughene	ed Glass						
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:								
Cover letter; 1700)2-PL-001 LOCA	TION PLAN; 17002	2-PL-100 PLANS	S; 17002-PL-200 E	LEVATIONS	; Delivery Note for	or OA4550	5
12. Certificates	(Certificate	A)						
	Town and Cou	untry Planning (Dev		of Ownership - Cer		or 2015 Cortificato	under Arti	clo 14
freehold interest or le	nt certifies that on the	ne day 21 days before ith at least 7 years le	e the date of this a ft to run) of any pa	pplication nobody ex art of the land to which	cept myself/the	e applicant was the on relates, and that	owner (owr	ner is a person with a land to which the application a section 65(8) of the Act).
Title: Ms	First name:	Veronica			Surname:	Deacon		
Person role:	APPL	ICANT	D	eclaration date:	20/	12/2017		✓ Declaration made
13. Declaration	1							
I/we hereby apply	for planning pern	nission/consent as	described in this	s form and the acc	ompanving p	lans/		
drawings and addi	tional information	n. I/we confirm that	, to the best of n	ny/our knowledge,	any facts sta		Date	06/02/2018
true and accurate	and any opinions	given are the gen	uine opinions of	the person(s) giving	ng them.	*	Date	