

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 a non-material amendment following a grant of planning permission. 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 N	ame, Address a	nd Contact Details			
Title:	First Name:	Leila		Surname:	Hegarty
Company name:					
Street address:	C/O Planning Potential				
			Telephone numb	er:	
			Mobile number:		
Town/City:			Fax number:		
Country:			Email address:		
Postcode:					
	acting on babalf of th		Yes	lo	
Are you an agent	acting on benail of the	ne applicant?	9 103 9 10		
	e, Address and (		9 103 9 1	Surname:	Goff
2. Agent Name	e, Address and C	Contact Details  Georgia			Goff
2. Agent Name	e, Address and C	Contact Details  Georgia			Goff
2. Agent Name Title: Miss Company name:	First Name:	Contact Details  Georgia	Telephone numb	Surname:	Goff 3578000
2. Agent Name Title: Miss Company name:	First Name: Planning Potential Magdalen House	Contact Details  Georgia		Surname:	
2. Agent Name Title: Miss Company name:	First Name: Planning Potential Magdalen House	Contact Details  Georgia	Telephone numb	Surname:	
2. Agent Name  Title: Miss  Company name:  Street address:	First Name: Planning Potential Magdalen House 148 Tooley Street	Contact Details  Georgia	Telephone numb  Mobile number:	Surname:	

3. Site Addres	ss Details					
Full postal addre	ess of the site (ir	ncluding full po	stcode where available	e) Description:		
House:	1	Suffix:				
House name:						
Street address:	Boscastle Roa	ad				
Town/City:	LONDON					
Postcode:	NW5 1EE					
Description of lo	ocation or a grid	reference		'		
(must be comple	eted if postcode		:			
Easting:	528622					
Northing:	186003					
4. Eligibility						
which this amen	dment relates? e sole owner, ha	as notification u	under article 10 of the	on, have an interest in t	• re	
Person notified		Address				Date of notification (DD/MM/YYYY)
		Number:	Suffix:	House name:		
		Street:				
		Town:				<del></del>
		Postcode:		]		
		L		J		
5. Description	n of Your Pro	oposal				
Description of Ap	pproved Develo	pment:				
	terrace above; s				of existing two storey rear extegarage and main house; remove	ension with single storey val of side extension; and other
Reference numb	per: 2017/2	2223/P				
*Date of decision (DD/MM/YYYY):	1.31/08/	2017				
What was the or	iginal application					
Householder pla						
	_		_	ibes the original applications		
	-		_	ing-house or developm	ent within its curtilage	
Uther: any	thing not covere	ed by the abov	e category			

6. Non-Material Amendment(s)	Sought		_
*Please describe the non-material ame	endment(s) you are seeking to make:		
Please refer to cover letter	marrier (e) you are cooking to make.		٦
Are you intending to substitute amende	ed plans or drawings?	Yes     No	!
Old plan/drawing numbers:	Please refer to cover letter		7
New plan/drawing numbers:	Please refer to cover letter		ĺ
Please state why you wish to make this	s amendment:		┙
Please refer to cover letter			٦
			=
7 Dra application Advise			
7. Pre-application Advice			
Han agaistanae ar prior advice hann as	pught from the legal outbority shout this application?	O Yes O No	
	ought from the local authority about this application?		
If Yes, please complete the following in	iformation about the advice you were given (this will	Il help the authority to deal with this application more efficiently):	
Officer name:		<u> </u>	_
Title: First name:	Kristina	Surname: Smith	
Reference:			
Date (DD/MM/YYYY): 26/02/2018	(Must be pre-application submission)		
Details of the pre-application advice re	ceived:		
Agreed the proposed changes are nor	n-material		
			=
8. Site Visit			_
o. Site visit			
Can the cite be seen from a public rea	d, public footpath, bridleway or other public land?	Yes  No	
·			
	e an appointment to carry out a site visit, whom shoul	uld they contact? (Please select only one)	
The agent	Other person		
9. Authority Employee/Membe	r		_
, , , , , , , , , , , , , , , , , , , ,			
With respect to the Authority, I am:			
<ul><li>(a) a member of staff</li><li>(b) an elected member</li></ul>	Do any of these statements ap	apply to you?	
(c) related to a member of sta (d) related to an elected mem	aff		
(d) related to an elected men	inei		
			_
10. Declaration			
I/wo haraby apply for planning parmics	sion/consent as described in this form and the accom	manying plane/	
drawings and additional information. I/v	we confirm that, to the best of my/our knowledge, any	ny facts stated are Date 09/03/2018	
true and accurate and any opinions giv	ven are the genuine opinions of the person(s) giving t	them.	
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