

Email: [planning@camden.gov.uk](mailto:planning@camden.gov.uk)  
Phone: 020 7974 4444  
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Development Management  
Camden Town Hall Extension  
Argyle Street  
London WC1H 8EQ

Application for removal or variation of a condition following grant of  
planning permission. Town and Country Planning Act 1990.  
Planning (Listed Buildings and Conservation Areas) 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:	<input type="text"/>	First Name:	<input type="text"/>	Surname:	<input type="text" value="Gary Sullivan &amp; Geraldine Norris"/>
Company name:	<input type="text"/>				
Street address:	<input type="text" value="Flat 2, 7, Woodchurch Road"/>				
	<input type="text"/>	Telephone number:	<input type="text"/>		
	<input type="text"/>	Mobile number:	<input type="text"/>		
Town/City:	<input type="text" value="London"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text" value="NW6 3PL"/>		<input type="text"/>		
Are you an agent acting on behalf of the applicant?		<input checked="" type="radio"/> Yes	<input type="radio"/> No		

**2. Agent Name, Address and Contact Details**

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="John"/>	Surname:	<input type="text" value="Muir"/>
Company name:	<input type="text" value="4D Studio"/>				
Street address:	<input type="text" value="Bedford House"/>				
	<input type="text" value="Fulham Green"/>	Telephone number:	<input type="text" value="02074718550"/>		
	<input type="text" value="69-79 Fulham High Street"/>	Mobile number:	<input type="text"/>		
Town/City:	<input type="text"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text" value="SW6 3JW"/>		<input type="text" value="Marianna@architect.uk.com"/>		

### 3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

House:  Suffix:

House name:

Street address:

Town/City:

Postcode:

Description of location or a grid reference  
(must be completed if postcode is not known):

Easting:

Northing:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes  No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title:  First name:  Surname:

Reference:

Date (DD/MM/YYYY):  (Must be pre-application submission)

Details of the pre-application advice received:

### 5. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter:

Erection of full width lower ground floor rear extension, part width ground floor rear extension and associated landscape works including excavation of rear garden to accommodate patio and installation of replacement access stairs from ground floor to garden level at rear.

Application reference number:

Date of decision:

Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started?  Yes  No

### 6. Condition(s) - Removal

Please state why you wish the condition(s) to be removed or changed:

The owners have now clarified legal ownership and right to utilise the party wall fences as part of their proposals. In order to achieve this some key measurements increase by up to 257mm.

If you wish the existing condition to be changed, please state how you wish the condition to be varied:

We wish to substitute drawings: 4D\_1614\_AP001B, 4D1614\_AP002B & 4D\_1614\_AP021B with drawings: 4D\_1614\_AP001B, 4D1614\_AP002B & 4D\_1614\_AP021B.

## 7. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

Yes  No

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

## 8. Certificates (Certificate B)

### 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 (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) and/or agricultural tenant ("*agricultural tenant*" has the meaning given in section 65(8) of the Town and Country Planning Act 1990) of any part of the land or building to which this application relates.

Owner/Agricultural Tenant	Date notice served
Name: Mr & Mrs Mirtcho Spassov Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: Flat 1 Locality: 7 Woodchurch Road Town: <input type="text"/> Postcode: NW6 3PL	20/02/2018
Name: Ms G Jones-Cueller Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: Flat 3 Locality: 7 Woodchurch Road Town: <input type="text"/> Postcode: NW6 3PL	22/01/2017
Name: Mr & Mrs S Curtis Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: Flat 4 Locality: 7 Woodchurch Road Town: <input type="text"/> Postcode: NW6 3PL	22/01/2017
Name: Mr D Luca Pasinato Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: Flat 5 Locality: 7 Woodchurch Road Town: <input type="text"/> Postcode: NW6 3PL	22/01/2017
Name: Ms S Calman Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: Flat 6 Locality: 7 Woodchurch Road	22/01/2017

## 8. Certificates (Certificate B)

Town:

Postcode:

Title:  First name:  Surname:

Person role:  Declaration date:   Declaration made

## 9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them.



Date