

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 approval of details reserved by condition. 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 N	ame, Address a	nd Contact Details						
Title: Mr	First Name:	Mark		Surname:	Davies			
Company name:				•				
Street address:	30A, Thurlow Road	I						
			Telephone numb	per:				
			Mobile number:					
Town/City:	London		Fax number:	Fax number:				
Country:			Email address:					
Postcode:	NW3 5PH							
Are you an agent	acting on behalf of th	ne applicant?	Yes	No				
2. Agent Name	, Address and C	Contact Details						
Title: Mr	First Name:	Jack		Surname:	Finnin			
				Surname.	FILLINI			
Company name:	Square Feet Archit	ects						
Street address:	95 Bell Street							
			Telephone numb	oer: 0207	4314500			
			Mobile number:					
Town/City:	London		Fax number:					
Country:	United Kingdom		Email address:					
Postcode:	NW1 6TL		jack.finnin@squ	jack.finnin@squarefeetarchitects.co.uk				

3. Site Addres	ss Details						
Full postal addre	ss of the site (in	cluding full postcoo	de where available	e) D	Description:		
House:	30	Suffix:	Α] [
House name:							
Street address:	Thurlow Road						
Town/City:	London						
Postcode:	NW3 5PH						
Description of lo (must be comple							
Easting:	526817						
Northing:	185494] _			
<u> </u>							
4. Pre-applica	tion Advice						
Has assistance o	or prior advice be	en sought from the	e local authority a	about this	application?	☐ Yes ●	No
5. Description	of the Prop	osal					
Please provide a	description of th	ne approved develo	opment as shown	on the de	ecision letter:		
			•		including excavation of	basement levels.	
Application refere	ence number:	2015/5409	9/P			Date of decision:	01/09/2016
Please state the Condition number		er(s) to which this a	application relates	3:			
Condition 7 & 9	(0).						
Has the develop	ment already sta	rted? Yes	□ No If Ye	es, please	state when the develor	oment was started:	01/09/2017
Has the develop			No		·		
6. Discharge	of Condition	(s)					
- 23ui go		•					
				at are beir	ng submitted for approv	al:	
		d for proposed tree	-	_	, .		
Condition 9: See	proposed detai	I sections through	green roof at 1:20	0 and gen	eral maintenance inforn	nation.	
7. Part Discha	rge of Cond	ition(s)					
Are you seeking	to discharge on	y part of a conditio	n?			○ Yes No	
, no you seeking	.o disoriarye OM	, part of a conditio	•••			_ 169 W NO	
8. Site Visit							
J. CALO FIGIL							
Can the site be s	een from a publ	c road, public foot	path, bridleway o	r other pu	blic land?	Yes No	
					, whom should they con	tact? (Please select c	only one)

8. Site Visit					
The agent					
9. Declaration					
I/we hereby apply for planning permission/consent as described in this form and the drawings and additional information. I/we confirm that, to the best of my/our knowled	ge, any facts stated are	V	Date	30/04/2018	

true and accurate and any opinions given are the genuine opinions of the person(s) giving them.