

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 Name, Address and Contact Details								
Title:	First Name:			Surname:	C/O Agent			
Company name:	Victoria Square Property Co	mpany Ltd						
Street address:	C/O Agent							
			Telephone numb	er:				
			Mobile number:					
Town/City:			Fax number:					
Country:			Email address:					
Postcode:								
Are you an agent acting on behalf of the applicant?			🖲 Yes 🔾 N	lo				

2. Agent Name, Address and Contact Details									
Title:	Mrs	First Name:	Harriet			Surnam	e: Humphre	ey	
Compa	any name:	Montagu Evans					2		
Street	address:	5 Bolton Street							
					Telephone numb	er: 02	073127541		
					Mobile number:				
Town/	City:	London			Fax number:				
Count	ry:	England			Email address:				
Postco	ode:	W1J 8BA			harriet.humphre	y@montag	gu-evans.co.u	ık	

3. Site Addres	ss Detalls					
Full postal addre	ess of the site (including	g full postcode where availa	ble) Description:			
House:	44	Suffix: A				
House name:						
Street address:	Gloucester Avenue					
Town/City:	London					
Postcode:	NW1 8JD					
	cation or a grid referen eted if postcode is not k					
Easting:	528336		¬			
Northing:	184003]
4. Pre-applica	ation Advice					
Has assistance of	or prior advice been so	ught from the local authority	/ about this application?	🔾 Yes 💿	No	
5. Descriptior	n of the Proposal					
Please provide a	description of the app	proved development as show	wn on the decision letter			
The partial dem		no. 44A Gloucester Avenue		d mansard roof extension, wit	th restoration of architectu	Jral
Application reference number: 2016/7089/P				Date of decision:	22/06/2017	
		which this application relat	es:			
Condition number	er(S).					
Has the develop	ment already started?	🔾 Yes 💿 No				
	ment aready stated?					
6. Discharge	of Condition(s)					
Please provide a	a full description and/or	list of the materials/details	that are being submitted for	approval:		
Please refer to a	application covering let	ter.				
7. Part Discha	arge of Condition((s)				
Are you seeking	to discharge only part	of a condition?		🔾 Yes 💿 No		
8. Site Visit						
Can the site be s	seen from a public road	d, 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

O The applicant

Other person

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	V	Date	25/06/2018
true and accurate and any opinions given are the genuine opinions of the person(s) giving them.		Dale	