

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk Telephone : 020 7974 1911

Fax : 020 7974 5713

For office use Date Payee App. No.

Fee

Application for listed building consent for alterations, extension or demolition of a listed building.

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

Please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address	2. Agent Name and Address
Title: MR First name: ANTHIMOS	Title: MRS First name: GEMUA
Last name: PAVLIDIS	Last name: PARTRIDAE
Company (optional): WEWORK	Company (optional): MG SIGNS LIMITED
Unit: House number: 71-91 House suffix:	Unit: 12 House number: House suffix:
House name:	House name:
Address 1: ALDWYCH	Address 1: PONDWOOD CLOSE
Address 2:	Address 2: MOULTON PARK
Address 3:	Address 3:
Town: LONDON	Town: NURTHAMPTON
County:	County:
Country:	Country:
Postcode: WC2B 4HN	Postcode: NN3 6RT
3. Description of Proposed Work	
Please describe the proposals to alter, extend or demolish the listed	
TO INSTALL X.3 ILLUMINIATED INTO	ENAL SIGNS XZ 1st Floor AND
XI 5th FLOOR PLUS XZ NON 1	ILLUMINATED BRASS SIGNS
TO BOUNDARY WALL AT GROWN	
I TO TOOKS IET VOITE ITT STEEDE	,

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3. Description of Proposed Work (continued)	4. Site Address Details
Has the work already started without consent?	Please provide the full postal address of the application site. Unit: House number: 125-129 House suffix: House number: AVIATION HOUSE
If Yes, please state when the work was started (DD/MM/YYYY):	Address 1:
	Address 2: Address 3: KINGSWAY
(date must be pre-application submission)	Town: LONDON
Has the work been Completed without consent?	Postcode (optional): WC2B 6NH
If Yes, please state the date when the work was completed (DD/MM/YYYY):	Description of location or a grid reference. (must be completed if postcode is not known): Easting: 530502 Northing: 81506
(date must be pre-application submission)	WEWORK AVIATION HOUSE
(date must be pre-application submission)	
S. Related Proposals Are there any current applications, previous proposals or demolitions for the site? If Yes please describe and include the planning application reference number(s), if known: Description Reference number PLANNING PRPLICATION P- 07280 112	G. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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). Please tick if the full contact details are not known, and then complete as much as possible: Officer name: Reference: Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?
7. Neighbour and Community Consultation Have you consulted your neighbours or the local community about the proposal? If Yes, please provide details:	8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member If Yes, please provide details of the name, relationship and role

Please provide a description of existing and proposed materials and finishes to be used in the building (demolition excluded):					
Trease provide a deseri	Existing (where applicable)	Proposed	Not applicable	Don't Know	
External walls					
Roof covering					
Chimney					
Windows					
External doors					
Ceilings					
Internal walls					
Floors					
Internal doors					
Rainwater goods					
Boundary treatments (e.g. fences, walls)	METIAL SIGNS XZ	BRASS SIGNS XZ			
Vehicle access and hard standing					
Lighting		LED LIGHTING INTERNAL TO INTERNAL SIGNS			
Others (add description)					
	Are you supplying additional information on submitted drawings or plans? Yes No If Yes, please state plan(s)/drawing(s) references:				
INTERNAL S	BIGNORMINGS) references. BIGNS NADE OF STEET RETURNATED FITTERS TO BU	RUS WITH A CRYLIC FACE AND	>		
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10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building?	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building: Yes No	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building: Yes No	a) Works to the Interior of the building? Yes No
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No
If the answer to c) is Yes:	c) Works to any structure or object fixed to the property (or buildings within
i) What is the total volume of the listed building?(cubic metres)	its curtilage) internally or externally? Yes No
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)? Yes No
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of
Please provide a brief description of the building or part of the building you are proposing to demolish:	structural support and state references for the plan(s)/drawing(s):
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only one box must be ticked)	Has a Certificate of Immunity from Listing been sought in respect of this building? Yes Don't know
Grade I Ecclesiastical Grade I	If Yes, please provide the result of the application:
Grade II* Ecclesiastical Grade II*	
Grade II Ecclesiastical Grade II	
Don't know	

14. Certificates				
Certificate under Regulati I certify/The applicant certifies that on	ficate A, B, C, or D, must be completed wit CERTIFICATE OF OWNERSHIP - CERTII on 6 of the Planning (Listed Buildings and the day 21 days before the date of this app	FICATE A Conservation Areas) Regula lication nobody except mysel	f/ the applicant was the	
owner <i>(owner is a person with a freehold</i> which the application relates. Signed - Applicant:	I interest or leasehold interest with at least 7 y	rears left to run) of any part of	the land or building to Date DD/MM/YYYY):	
		PRETRIDGE	8/11/2018	
Legrify/ The applicant certifies that I ha	CERTIFICATE OF OWNERSHIP - CERTIF on 6 of the Planning (Listed Buildings and ove/the applicant has given the requisite not on, was the owner (owner is a person with a fro ding to which this application relates.	Conservation Areas) Regula ice to everyone else (as listed	below) who, on the day	
Name of Owner	Address		Date Notice Served	
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):	
I certify/ The applicant certifies that: Neither Certificate A or B can be All reasonable steps have been	CERTIFICATE OF OWNERSHIP - CERTIF on 6 of the Planning (Listed Buildings and e issued for this application taken to find out the names and addresses of at least 7 years left to run) of the land or build	Conservation Areas) Regula	person with a freehold	
Name of Owner	Address		Date Notice Served	
Notice of the application has been publ (circulating in the area where the land is		On the following date (which than 21 days before the date	must not be earlier of the application):	
Claused Apollous	Ordered Asset		Data DD/MM (VVVV)	
Signed - Applicant:	Or signed - Agent:		Date DD/MM/YYYY):	

14. Certificates (continued) CERTIFICA Certificate under Regulation 6 of the Pla					
Certificate under Regulation 6 of the Pla	TE OF OWN	EDCUID CEDT	EICATE D		
Leastiful The amplicant continue that.				reas) Regulation	ons 1990
I certify/ The applicant certifies that: Certificate A cannot be issued for this application	nn.				
 All reasonable stens have been taken to find out 	it the names	and addresses of	f everyone else w	ho, on the day :	21 days before the
date of this application, was the owner (owner) of any part of the land to which this application	is <i>a person wi</i> 1 relates, but	th a freehold inte I have/ the appl	rest or leasehold it cant has been un	able to do so.	ast / years left to run)
The steps taken were:					
Notice of the application has been published in the foll	owina newsi	paper	On the following	ng date (which r	must not be earlier
(circulating in the area where the land is situated):			than 21 days b	efore the date o	of the application):
Signed - Applicant:	Or signed	l - Agent:			Date DD/MM/YYYY):
15. Planning Application Requirements - Cl			VAIL TO PA		
Please read the following checklist to make sure you ha information required will result in your application bein	ve sent all th	e information in	support of your p	roposal. Failure	e to submit all
the Local Planning Authority has been submitted.	g deemed in	valid. It will not	be considered va	ila unui ali inioi	imation required by
The original and 3 copies of a completed and dated		The original an	d 3 copies of othe	r plans and draw	wings or f the application: 🏻
application form:	Ø		d 3 copies of the		
The original and 3 copies of a plan which identifies the	4		tificate (A, B, C, o		
land to which the application relates and drawn to an identified scale and showing the direction of North:		The original an	d 3 copies of a de help text and gui	sign and access	statement,
identified scale and showing the direction of North.	<u>F</u>	ir required (see	neip text and gui	dance notes for	details).
16. Declaration					
I/we hereby apply for planning permission/consent as o	lescribed in t				
information.		this form and the	accompanying p	lans/drawings a	and additional
Information. Signed - Applicant:	ned Agent	this form and the		olans/drawings a ate (DD/MM/YY	
	ned Agent	-	D		YY): (date cannot be
	and Agent	-	D	ate (DD/MM/YY	YY):
	and Agent	PAG	D	ate (DD/MM/YY	YY): (date cannot be
Signed - Applicant:	mod Agont	PAG	D ETRIDAE	ate (DD/MM/YY	(date cannot be pre-application)
17. Applicant Contact Details Telephone numbers	Extension	18. Agent	Contact Deta	ate (DD/MM/YY	(date cannot be pre-application) Extension
Signed - Applicant: 17. Applicant Contact Details	and Agent	PAGE	Contact Deta	ate (DD/MM/YY	(date cannot be pre-application)
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Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath of the planning authority needs to make an appointment.	Extension number:	Telephone n Country cod Country cod Country cod Email addre	Contact Deta umbers e: National num e: Mobile numl e: Fax number ss (optional):	ate (DD/MM/YY O	(date cannot be pre-application) Extension number:
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath if the planning authority needs to make an appointmen out a site visit, whom should they contact? (Please selections)	Extension number:	Telephone in Country cod Country cod Country cod Email addre	Contact Deta umbers e: National num e: Fax number ss (optional):	ate (DD/MM/YY O	(date cannot be pre-application) Extension number:
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 19. Site Visit Can the site be seen from a public road, public footpath of the planning authority needs to make an appointment.	Extension number:	Telephone n Country cod Country cod Country cod Email addre	Contact Deta umbers e: National num e: Fax number ss (optional):	ate (DD/MM/YY O	(date cannot be pre-application) Extension number:
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): The planning authority needs to make an appointment out a site visit, whom should they contact? (Please select If Other has been selected, please provide:	Extension number:	Telephone in Country cod Country cod Country cod Email addre or other public la	Contact Deta umbers e: National num e: Fax number ss (optional):	ate (DD/MM/YY O	(date cannot be pre-application) Extension number:

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