

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.

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1. Site Address

Number

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.

Suffix			
Property name			
Address line 1	Highgate Road		
Address line 2			
Address line 3			
Town/city	London		
Postcode	NW5 1PA		
Description of site location must be completed if postcode is not known:			
Easting (x)	528774		
Northing (y)	185543		
Description			
2. Applicant Detai	Is		
2. Applicant Detai	ls Ms		
Title	Ms		
Title First name	Ms Sharon		
Title First name Surname	Ms Sharon		
Title First name Surname Company name	Ms Sharon Duah		
Title First name Surname Company name Address line 1	Ms Sharon Duah		
Title First name Surname Company name Address line 1 Address line 2	Ms Sharon Duah		
Title First name Surname Company name Address line 1 Address line 2 Address line 3	Ms Sharon Duah		

2. Applicant Deta	ils				
Country					
Postcode					
Primary number					
Secondary number					
Fax number					
Email address					
Are you an agent actin	g on behalf of the applicant?				
3. Agent Details	Mico				
Title	Miss				
First name	Hannah				
Surname	Walker				
Company name	Fuller Long Planning Consultants				
Address line 1	Studio 13				
Address line 2	9 Tanner Street				
Address line 3					
Town/city	London				
Country					
Postcode	SE1 3LE				
Primary number	07951252220				
Secondary number					
Fax number					
Email	hannah.walker@fullerlong.com				
4. Description of the Proposal					
Please provide a description of the approved development as shown on the decision letter					
Erection of single storey rear extension with green roof above; replacement of 2 x rear doors with timber framed single glazed windows; replacement of front and rear windows with timber framed single glazed sash replacements; replacement of existing rooflight; replacement of concrete roof tiles with slate; installation of replacement front and rear guttering; repairs to stucco, brickwork and stonework to front and rear. Internal alterations to include alterations to layout at ground floor level; replacement of internal staircase with like for like design; re-plastering of all internal walls and ceilings; replacement of majority of internal timber fittings, including doors and flooring; installation of new tiling to bathrooms and utility room; installation of new fireplaces (part retrospective).					
Reference number					
2018/5520/L					
Date of decision (date must be pre- application submission)					
Please state the condition number(s) to which this application relates Condition number(s)					
• • • • • • • • • • • • • • • • • • • •					

4. Description of t	he Proposal		
4a 4b 4c			
Has the development a	Iready started?	⊚ Yes	□ No
If Yes, please state when the development was started (date must be pre- application submission)	01/06/2018		
Has the development b	een completed?	ℚ Yes	⊚ No
5. Part Discharge	of Conditions		
_	charge only part of a condition?	○ Yes	⊚ No
6. Discharge of Co	onditions		
Please provide a full de	escription and/or list of the materials/details that are bein	g submitted for approval	
4b - details of brick to b	posed aluminium windows and doors for extension be used for extension and sample panel of brickwork to loval from brickwork and patch sample to be available o	be erected on site for inspection. n site for inspection.	
7.0% - 1/2-1/			
7. Site Visit			
Can the site be seen from	om a public road, public footpath, bridleway or other pub	olic land?	□ No
If the planning authority The agent The applicant Other person	needs to make an appointment to carry out a site visit,	whom should they contact?	
8. Pre-application	Advice		
Has assistance or prior	advice been sought from the local authority about this a	application? Yes	□ No
If Yes, please complet efficiently):	e the following information about the advice you we	re given (this will help the authority to deal wit	h this application more
Officer name:			
Title	Ms		
First name	Charlotte		
Surname	Meynell		
Reference			
Date (Must be pre-appl	ication submission)		
Details of the pre-applic	cation advice received		

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 (cannot be pre- application)	17/04/2019	