



Application for a non-material amendment following a grant of planning permission. Town and Country Planning Act 1990

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Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

Camden

Email:

planning@camden.gov.uk

Phone: Fax:

020 7974 4444 020 7974 1680 Development Management Camden Town Hall Extension

Argyle Street London WC1H 8EQ

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

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

1. Applicant Name and Address				
Title:	MR+MRS First name: PETER + HILARY			
Last name:	AUGAR + KALMBACH			
Company (optional):				
Unit:	House House suffix:			
House name:	C/O AGENT			
Address 1:				
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:				

2. Agent Name and Address			
Title:	MISS First name: ENYA		
Last name:	MACLIAM ROBERTS		
Company (optional):	SAVILLS		
Unit:	House number: 33 House suffix:		
House name:			
Address 1:	MARGARET STREET		
Address 2:			
Address 3:			
Town:	LONDON		
County:			
Country:			
Postcode:	MIG 020		

Version 2018.1

3. Site Address Details Please provide the full postal address of the application site. Unit: House Rumber: House suffix: House number: MORNINGTON TERRACE Address 1: MORNINGTON TERRACE Address 2: Address 3: Town: LONDON County: Postcode (optional): NWI 7RR (optional): Description of location or a grid reference. (must be completed if postcode is not known): Easting: 528955 Northing: \(\) \(4. Pre-application Advice Has assistance or prior advice been sought authority about this application? If Yes, please complete the following information more efficiently). Please tick if the full contact details are not known, and then complete as much as possible. Officer name: Date of advice (DD/MM/YYYY): Details of pre-application advice received.	Yes No			
5. Eligibility Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates? If you have answered No to this question, you cannot apply to make a non-material amendment. If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given? Yes No Not Applicable					
If you have answered No to this question, you cannot fiyou have answered Yes to this question, please give details of pe		ndment.			
Person Notified	Address	Date of Notification			
NI/A					
6. Authority Employee / Member It is an important principle of decision-making that the process is open and transparent. For the purposes of this question "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts , would conclude that there was bias on the part of the decision-maker in the local planning authority. Do any of the following statements apply to you and/or agent? Yes No 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					
ii yes piease provide details of their flame, fole and flow you are	TOTAL TO STIFT OF				

7. Description Of Your Proposal					
Please provide the description of the approved development as shown on the decision letter, including application reference number and date of decision in the sections below:					
CHANGE OF USE OF IXI BED FLAT AND IX3 BED I	NTO A IX 4 BED DWELLINGHOUSE				
FRECTION OF REAR LOWER GROUND FLOOR EXTENSION	ON FOLLOWING DEMOLITION OF				
EXISTING AND REAR FENESTRATION AUTERATIONS	. REPLACEMENT OF FRONT/ROW				
SINGLE GUAZING	g repurcement front paving				
AND REPLACEMENT OF FRONT BALCONY RAILING, REAR LANDSCAPING					
ALTERATIONS.					
Reference number:	Date of decision (DD/MM/YYYY):				
2019/2966/P	09/09/2019				
What was the original application type?: (e.g. /Full', 'Householder and Listed Building', 'Outline') FULL					
For the purpose of calculating fees, which of the following best describes the origin	nal application type?				
Householder development: development to an existing dwelling-house or development within its curtilage					
Other: anything not covered by the above category	X				
8. Non-Material Amendment(s) Sought					
Please describe the non-material amendment(s) you are seeking to make:					
PLEASE, COUERING LETTER, TO UPGRADE S	BINGLE-GUAZEO WINDOWS				
TO PROVIDE DOUBLE GLAZING.					
Are you intending to substitute amended plans or drawings?	Yes No				
If Yes, please complete the following:					
Old plan/drawing number(s):					
PLEASE SEE COVERING LETTER.					
New plan/drawing number(s):					
PLEASE SEE COVERING LETTER.					
Please state why you wish to make this amendment:					
PLEASE SEE COVERING LETTER.					
i	1.1				

9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority (LPA) has been submitted.					
The original and 3 copies* of a completed and dated application form					
The original and 3 copies* of other plans and drawings or information necessary to describe the subject of the application:					
The correct fee:					
*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.					
10. Declaration We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. If 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. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): 21.10.2019					
11. Applicant Contact Details	12. Agent Contact Details				
Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): C/O AGENT	Telephone numbers Country code: National number: Extension number: O2O 75579993 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Enya, macliamroberts@savills.com.				
13. Site Visit					
Can the site be seen from a public road, public footpath, bridleway o If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) If Other has been selected, please provide: Contact name: AS ABOUE	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:				
Email address: -					