**Planning, Regeneration & Economy**
Level 6, River Park House, 225 High Road, Wood Green, London N22 8HQ
**Tel:** 020 8489 1000 **Email:** planningcustomercare@haringey.gov.uk
www.haringey.gov.uk

Haringey Council

Haringey Council
Planning, Regeneration & Economy
23 JAN 2013
Received
6th Floor, River Park House
225 High Road N22 8HQ

# Application for approval of details reserved by condition.

## Town and Country Planning Act 1990

## 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

| | | | | | |
|---|---|---|---|---|---|
| Title: | MS | First name: | FIONA | | |
| Last name: | LOVERING | | | | |
| Company (optional): | ONE HOUSING GROUP | | | | |
| Unit: | | House number: | 100 | House suffix: | |
| House name: | | | | | |
| Address 1: | CHALK FARM ROAD | | | | |
| Address 2: | LONDON | | | | |
| Address 3: | | | | | |
| Town: | | | | | |
| County: | | | | | |
| Country: | | | | | |
| Postcode: | NW1 8EH | | | | |

### 2. Agent Name and Address

| | | | | | |
|---|---|---|---|---|---|
| Title: | MR | First name: | ANDREW | | |
| Last name: | ROBSON | | | | |
| Company (optional): | PRP ARCHITECTS | | | | |
| Unit: | | House number: | | House suffix: | |
| House name: | PEPPER WORKS | | | | |
| Address 1: | SUMMER ROAD | | | | |
| Address 2: | THAMES DITTON | | | | |
| Address 3: | | | | | |
| Town: | | | | | |
| County: | SURREY | | | | |
| Country: | | | | | |
| Postcode: | KT7 0QJ | | | | |

## 3. Site Address Details

Please provide the full postal address of the application site.

| | | | | | |
|---|---|---|---|---|---|
| Unit: | | House number: | | House suffix: | |
| House name: | | | | | |
| Address 1: | 17 & 34 PRETORIA ROAD | | | | |
| Address 2: | TOTTENHAM | | | | |
| Address 3: | LONDON | | | | |
| Town: | | | | | |
| County: | | | | | |
| Postcode (optional): | N17 8DX. | | | | |

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: 533627 Northing: 191549

Description:

## 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☐ Yes ☒ No

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?

## 5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

REDEVELOPMENT OF THE SITE TO PROVIDE A NEW FOUR STOREY BUILDING HOUSING 52 EXTRA CARE RESIDENTIAL UNITS (USE CLASS C3) COMPRISING A MIX OF 44x1 BED & 8x2 BED UNITS WITH ANCILLARY FEATURES FOR USE BY RESIDENTS INCLUDING RESTAURANT, COMMUNITY CLINIC, ACTIVITY AREA, IT SUITE, STAFF AREAS, STORAGE, ENERGY CENTRE, REFUSE/RECYCLING AREA, VEHICLE PARKING (INCLUDING DISABLED SPACES) CYCLE/BUGGY PARKING & ASSOCIATED LANDSCAPING, INCLUDING COMMUNAL GARDENS & BALCONIES

Reference number: H49/2014/1080 Date of decision: 16/09/2014 (Date must be pre-application submission) (DD/MM/YYYY)

Please state the condition number(s) to which this application relates:

| | | | |
|---|---|---|---|
| 1. | 3 | 6. | 9 |
| 2. | 4 | 7. | 12 |
| 3. | 5 | 8. | 17 |
| 4. | 6 | 9. | 18 |
| 5. | 7 | 10. | |

Has the development already started? ☐ Yes ☒ No

If Yes, please state when the development started (DD/MM/YYYY): (date must be pre-application submission)

Has the development been completed? ☐ Yes ☒ No

If Yes, please state when the development was completed (DD/MM/YYYY): (date must be pre-application submission)

## 6. Discharge Of Condition

Please provide a full description and/or list of the materials/details that are being submitted for approval:

PLEASE REFER TO THE ACCOMPANYING LETTER FOR FULL DESCRIPTION OF INFORMATION THAT HAS BEEN SUBMITTED TO DISCHARGE THE ABOVE NOTED CONDITIONS

## 7. Part Discharge Of Condition(s)

Are you seeking to discharge only part of a condition? ☐ Yes ☒ No

If Yes, please indicate which part of the condition your application relates to: