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

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:	MR+MRS
First name:	PAUL
Last name:	DAVISON
Company (optional):	
Unit:	
House number:	9
House suffix:	
House name:	SIBHAVEN
Address 1:	VIEW RD
Address 2:	
Address 3:	
Town:	LONDON
County:	HARINGEY
Country:	U.K.
Postcode:	N6 4DJ

2. Agent Name and Address

Title:	MS.
First name:	SANYA
Last name:	POLESCUK
Company (optional):	SANYA POLESCHK ARCHITECTS
Unit:	
House number:	8A
House suffix:	
House name:	
Address 1:	BELSIZE COURT GARAGES
Address 2:	BELSIZE LANE
Address 3:	
Town:	LONDON
County:	CAMDEN
Country:	U.K.
Postcode:	NW3 5AJ

3. Address Details

Please provide the full postal address of the application site.

Unit:		House number:	9	House suffix:	
House name:	SIRHAVEN				
Address 1:	VIEW ROAD				
Address 2:					
Address 3:					
Town:	LONDON				
County:					
Postcode (optional):	N6 4DJ				

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

Easting: 527903 Northing: 188091

Description:

GRADE II LISTED DETACHED SINGLE FAMILY DWELLING

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: NAIRITA CHAKRABORTY

Reference: HGY/2015/0510 & HGY/2015/0512

Date (DD/MM/YYYY): 07/05/2015
(must be pre-application submission)

Details of pre-application advice received?

TO SEND A SAMPLE OF PROPOSED ROOF TILE.

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:

FULL PLANNING PERMISSION + LISTED BUILDING CONSENT AS PER HARINGEY DECISION LETTERS: HGY/2015/0510 & HGY/2015/0512

Reference number: HGY/2015/0510 HGY/2015/0512 Date of decision: (Date must be pre-application submission) (DD/MM/YYYY)

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

1.	HGY/2015/0510, CONDITION #3	6.	
2.	HGY/2015/0512, CONDITION #3	7.	
3.	" " " " #4	8.	
4.		9.	
5.		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:

DRAWINGS + SCHEDULE AS PER ATTACHED DRAWING ISSUE SHEET.
ROOFTILE SAMPLE TO BE POSTED UNDER SEPERATE COVER.

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: