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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 (as amended); Planning (Listed Buildings and Conservation Areas) Act 1990 (as amended)

### 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.

## Site Location

**Disclaimer:** We can only make recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

|                |  |
|----------------|--|
| Number         | <input type="text" value="256"/>                     |
| Suffix         | <input type="text"/>                                 |
| Property Name  | <input type="text" value="Eastman Dental Hospital"/> |
| Address Line 1 | <input type="text" value="Gray's In Road"/>          |
| Address Line 2 | <input type="text"/>                                 |
| Address Line 3 | <input type="text"/>                                 |
| Town/city      | <input type="text" value="London"/>                  |
| Postcode       | <input type="text" value="WC1X 8LD"/>                |

Description of site location must be completed if postcode is not known:

|             |                                     |              |                                     |
|-------------|-------------------------------------|--------------|-------------------------------------|
| Easting (x) | <input type="text" value="530723"/> | Northing (y) | <input type="text" value="182449"/> |
| Description | <input type="text"/>                |              |                                     |

## Applicant Details

### Name/Company

Title

First name

Surname

Company Name

### Address

Address line 1

Address line 2

Address line 3

Town/City

County

Country

Postcode

Are you an agent acting on behalf of the applicant?

Yes

No

### Contact Details

Primary number

Secondary number

Fax number

Email address

## Agent Details

Name/Company

Title

First name

Surname

Company Name

## Address

Address line 1

Address line 2

Address line 3

Town/City

County

Country

Postcode

## Contact Details

Primary number

\*\*\*\*\* REDACTED \*\*\*\*\*

Secondary number

Fax number

Email address

\*\*\*\*\* REDACTED \*\*\*\*\*

## Description of the Proposal

Please provide a description of the approved development as shown on the decision letter

Variation of condition 2 (Approved Plans) of planning permission reference 2019/2879/P dated 10/03/2020 (later varied by planning permission 2020/5791/P dated 21/06/2021) (for: Partial redevelopment of the site to create medical research, outpatient facility and academic floorspace with changes to include amendments to Plot 1 (former Royal Free Hospital Building) to amend the lecture theatre east facade; east facade updates (locations of doors); north west corner facade (change of detailing); facade level changes; firefighting lift; Alexandra Wing demolition and construction methodology). New changes include lowering height of link between Alexandra building and Plot 1, relocation of vent, new low level vent, altering the flue number and design, additional demolition and construction details, and changes to flues on Plot 1.

Reference number

2021/1809/P

Date of decision (date must be pre-application submission)

18/04/2023

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

Condition number(s)

14

Has the development already started?

- Yes  
 No

If Yes, please state when the development was started (date must be pre-application submission)

01/09/2020

Has the development been completed?

- Yes  
 No

## Part Discharge of Conditions

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

Partially discharge condition 14 of planning permission 2021/1809/P relating to details, materials and samples for the north façade of Plot 2.

## Discharge of Conditions

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

Please refer to cover letter.

## Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

Yes

No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?

The agent

The applicant

Other person

## 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):**

Officer name:

Title

First Name

Surname

Reference

Date (must be pre-application submission)

Please refer to cover letter.

## Declaration

I/We hereby apply for Approval of details reserved by a condition (discharge) as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published as part of a public register and on the authority's website;
- Our system will automatically generate and send you emails in regard to the submission of this application.

I / We agree to the outlined declaration

Signed

Tarleen Kaur

Date

01/08/2024