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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.

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.

| 1. Applicant Name, Address and Contact Details | | | | | | | | | | |
|---|---------------------|---------------------|-----------------|--------------------|---------------------|--|--|--|--|--|
| дриоситт | | | | | | | | | | |
| Title: Mr | First name: Jeff | Surname: Ast | le | | | | | | | |
| Company name | Guiness Trust | | | | | | | | | |
| Street address: | Gate House | | Country Code | National Number | Extension Number | | | | | |
| | Fretherne Rd | Telephone number: | | | | | | | | |
| | | Mobile number: | | | | | | | | |
| Town/City | Herts | | |] [| | | | | | |
| County: | | Fax number: | | | | | | | | |
| Country: | United Kingdom | Email address: | | | | | | | | |
| Postcode: | AL8 6NS | | | | | | | | | |
| Are you an agent acting on behalf of the applicant? Yes No | | | | | | | | | | |
| 2. Agent Name, Address and Contact Details | | | | | | | | | | |
| Title: | First Name: Steven | Surname: Att | wood | | | | | | | |
| Company name: | Sprunt | | | | | | | | | |
| Street address: | First Floor | | Country Code | National Number | Extension Number | | | | | |
| | 20 Northdown Street | Telephone number: | | 020 7833 3555 | | | | | | |
| | | Mobile number: | | | | | | | | |
| Town/City | London | Fax number: | |] | | | | | | |
| County: | London | T AX HUHIDEL. | | | | | | | | |
| Country: | UK | Email address: | | | | | | | | |
| Postcode: | N1 9BG | sattwood@sprunt.net | | | | | | | | |

| 3. Site Address | Deta | ils | | | | | | | | | |
|---|--------------------|------------------|-------------------|-----------|--------|--------------|----------|---|--|--|--|
| Full postal address of | of the s | ite (including f | ull postcode wh | ere avail | able) | | | Description: | | | |
| House: | | | Suffix: | | | | | Erection of two buildings (4-storeys and 6-storeys) with basement to provide 64 (28 | | | |
| House name: | Guinn | ess Court | | | | | | private and 36 affordable) residential units (2 x 4-bedroom, 15 x 3-bedroom, 19 x 2 bedroom, and 28 x 1-bedroom) with 29 car parking spaces (19 underground and 1 | | | |
| Street address: | St Edmunds Terrace | | | | | | | surface level), 71 cycle parking spaces, and associated landscaping (following demolition of all existing buildings on site) | | | |
| | | | | | | | | | | | |
| Town/City: | Londo | n | | | | | | | | | |
| County: | | | | | | | | | | | |
| Postcode: | NW8 7 | 'QE | | | | | | | | | |
| Description of locat (must be completed | | | | | | | | | | | |
| Easting: | | 527438 | <u> </u> | | | | | | | | |
| Northing: | | 183555 | | | | | | | | | |
| | | | | | | | | | | | |
| 4. Pre-applicati | on A | dvice | | | | | | | | | |
| Has assistance or pr | ior adv | ice been sougl | nt from the local | authorit | y abo | out this app | olicatio | n? | | | |
| If Yes, please comple | ete the | following info | rmation about t | he advic | e you | ı were giver | n (this | will help the authority to deal with this application more efficiently): | | | |
| Officer name: | | _ | | | | | | | | | |
| Title: Mr | Fi | irst name: C | harles | | | | | Surname: Rose | | | |
| Reference: | | | | | | | | | | | |
| Date (DD/MM/YYYY): (Must be pre-application submission) | | | | | | | | | | | |
| Details of the pre-ap | plication | on advice rece | ved: | | | | | | | | |
| Various items were r | request | ted to be chan | ged. These item | s have be | een ir | ncorporated | d into t | the design of the elevations and informal approval has been given. | | | |
| . Description of Proposal | | | | | | | | | | | |
| DI II | | 6.11 | | | | | | | | | |
| Please provide a des | | | | | | | | ter: ate and 36 affordable) residential units (2 x 4-bedroom, 15 x 3-bedroom, 19 x 2- | | | |
| bedroom, and 28 x demolition of all exi | 1-bedro | oom) with 29 c | ar parking space | s (19 un | dergr | ound and 1 | 10 surfa | ace level), 71 cycle parking spaces, and associated landscaping (following | | | |
| Application reference number: 2010/4850/P Date of decision: 13/12/2010 | | | | | | | | | | | |
| Please state the condition number(s) to which this application relates: | | | | | | | | | | | |
| Condition number(s | s): | | | | | | | | | | |
| Lies the developmen | nt alrag | adv startad? | O Vo | | No | If Voc. pl | logge o | tota when the development was started. | | | |
| Has the developmen | | _ | • Ye | . (| No | ii res, pi | iease s | tate when the development was started: 03/01/2011 | | | |
| Has the developmen | nt beer | n completed? | ○ Ye | • | No | | | | | | |
| 6. Discharge of | Cond | lition(s) | | | | | | | | | |
| Please provide a full description and/or list of the materials/details that are being submitted for approval: | | | | | | | | | | | |
| The approval of of tl Camden Council. | he elev | ations to Block | B only require a | pproval | The | proposal ha | as beei | n amended to suit the changes requested by Charles Rose and Bethany Arbery of | | | |
| 7. Part Discharge of Condition(s) | | | | | | | | | | | |
| Are you seeking to discharge only part of a condition? Yes No | | | | | | | | | | | |
| If Yes, please indicat The approval of Bloo | | | ondition your ap | plication | relat | tes to: | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

| 6 ou ve v | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|
| 8. 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? (Please select only one) | | | | | | | | | | |
| The agent Other person | | | | | | | | | | |
| If Other has been selected, please provide: | | | | | | | | | | |
| Contact name: | | | | | | | | | | |
| Title: Mr First name: Noel Surname: D'Arcy | | | | | | | | | | |
| Telephone number: | | | | | | | | | | |
| Country code: National number: Extension number: | | | | | | | | | | |
| Email Address: noel.d'arcy@gallifordtry.co.uk | | | | | | | | | | |
| 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. | | | | | | | | | | |
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