Application for Planning Permission. Town and Country Planning 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. Applic	ant Name and Address	2. Agent Name and Address								
Title:	First name:	Title:	MR F	First name:	JEREMY					
Last name:		Last name:	WAKEHAM							
Company (optional):	ATHLONE HOUSE LIMITED	Company (optional):	WHITHERS L	LP		· · · · · · · · · · · · · · · · · · ·	$\overline{\mathbb{J}}$			
Unit:	House House suffix:	Unit:		use mber:		louse uffix:				
House name:	C/O AGENT	House name:	16 OLD BAILE	ΞΥ			٦			
Address 1:		Address 1:					\exists			
Address 2:		Address 2:					٦			
Address 3:		Address 3:					Ī			
Town:		Town:	LONDON				Ī			
County:		County;		***************************************						
Country:		Country:								
Postcode:		Postcode:	EC4M 7EG							
3. Descri	otion of the Proposal			ik deli menden kanal deli deli deli deli deli deli deli del		nogramen de Halle (de l'entre de	\preceq			
Please desc	ribe the proposed development, including any change	of use:								
DEMOLIT WITH ANO	ION OF ATHLONE HOUSE AND THE ERECTION OF AN CILLARY UNDERGROUND PARKING, PLANT AND LANG	8 BEDROOM SII SCAPING	NGLE DWELL	ING HOUSE	E (CLASS C3)	TOGETHER				
	ding, work or change of use already started?	Yes 🗸	₫ No				-1			
	state the date when building, were started (DD/MM/YYYY):		(date must be	pre-applica	ition submissi	on)	A STATE OF THE PERSONNELS AND ADDRESS AND			
If Yes, please	ing, work or change of use been completed? state the date when the building, work use was completed: (DD/MM/YYYY):	Yes	No date must be	l _{ij}	tion submissia	วกโ	**************************************			
Annual Contraction of the Contra	,					-	J			

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House House suffix:	authority about this application? Yes No
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: ATHLONE HOUSE	application more efficiently).
Address 2: HAMPSTEAD LANE	Please tick if the full contact details are not known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	CHARLES THUAIRE AND LOUISE MCCAUGHLAN
County:	Reference:
Postcode (optional):	CCS/CMM/1157.121
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): 05/11/2012 (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	RESPONSE LETTER DATED 5TH NOVEMBER 2012
E Radastina and Vahiela Assass Rands and Rights of Way	7. Weste Stevens and Collection
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed to or from the public highway? Yes No	Do the plans incorporate areas to store and aid the collection of waste?
Is a new or altered pedestrian access proposed to or from	If Yes, please provide details:
the public highway? Yes No	REFUSE BINS ARE PROPOSED TO BE LOCATED ADJACENT TO THE ENTRANCE GATES, COMFORTABLY WITHIN THE
Are there any new public roads to be provided within the site? Yes No	REQUIRED DISTANCE FOR BIN COLLECTION.
Are there any new public	
rights of way to be provided within or adjacent to the site? Yes No	
Do the proposals require any diversions	Have arrangements been made
/extinguishments and/or creation of rights of way?	for the separate storage and collection of recyclable waste?
If you answered Yes to any of the above questions, please show	If Yes, please provide details:
détails on your plans/drawings and state the reference of the plan (s)/drawings(s)	SERVICING VECHILES WILL ACCESS THE SITE VIA THE DRIVEWAY
The second secon	
8. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff	Do any of these statements apply to you? Yes No
(b) an elected member	NO any or mese statements apply to you:
(c) related to a member of staff(d) related to an elected member	v.
If Yes, please provide details of the name, relationship and role	

	Existing (where applicable)			Proposed	Not	applicable	Don't Know		
Walls				SEE DESIGN AI DETAILS]			
Roof	•			SEE DESIGN AF DETAILS	R]			
Windows	SEE DESIGN AND ACCESS STATEMENT FOR DETAILS					R]		
Doors	SEE DESIGN AND ACCESS STATEMENT FOR DETAILS					R]		
Boundary treatments (e.g. fences, walls)	SEE DESIGN AND ACCESS STATEM DETAILS					3			
Vehicle access and hard-standing				SEE DESIGN AND ACCESS STATEMENT FOR DETAILS					
Lighting	-			SEE DESIGN AND ACCESS STATEMENT FOR DETAILS					
Others (please specify)				SEE DESIGN AN DETAILS					
	cional information on su ences for the plan(s)/dra TTER				ss statement?	Yes [No	
0. Vehicle Parking						**************************************	Kentri Caran		
	nation on the existing a	nd proposed nu stal		site parking space			-		
Cars	Existing				spaces retained) in spaces				
Light goods vehic public carrier vehi				0 0				_	
public carrier vehi Motorcycles	cles		etisti eti matati sira, maski kummun yang majadiy, ng mpilipy	0		0	*******		
Disability space				0		0			
Cycle spaces	0		The material and another section of the section of	0 0					
Other (e.g. Bus)	*****	**************************************	***************************************	0 0			-		
	ther (e.g. Bus) 1 0							8 8	

11. Foul Sewage	12. Assessment of Flood Risk						
Please state how foul sewage is to be disposed of:	Is the site within an area at risk of flooding? (Refer to the						
Mains sewer Cess pit	Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)						
Septic tank Other	Yes No						
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.						
Are you proposing to connect to the existing drainage system? Yes No	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)? Yes No						
If Yes, please include the details of the existing system on the application drawings and state references for the plan(s)/drawing(s):	Will the proposal increase the flood risk elsewhere? Yes No						
CONNECTION INTO THE EXISTING FOUL AND SURFACE WATER SYSTEMS FOLLOWING SURVEY	How will surface water be disposed of? Sustainable drainage system Existing watercourse						
	Sustainable drainage system Existing watercourse Soakaway Pond/lake						
	Main sewer						
	The state of the s						
13. Biodiversity and Geological Conservation	14. Existing Use						
To assist in answering the following questions refer to the guidance	Please describe the current use of the site:						
notes for further information on when there is a reasonable likelihood that any important biodiversity or geological	DERELICT BUILDING AND GROUNDS CURRENTLY VACANT						
conservation features may be present or nearby and whether they are likely to be affected by your proposals.							
Having referred to the guidance notes, is there a reasonable	Is the site currently vacant? Yes No If Yes, please describe the last use of the site:						
likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to							
or near the application site?	FORMER HOSPITAL (CLASS C2)						
a) Protected and priority species:							
Yes, on the development site							
Yes, on land adjacent to or near the proposed development	When did this use end (if known)?						
No b) Designated sites, important habitats or other biodiversity	OD/MM/YYYY 01/01/2013 (date where known may be approximate)						
features:	Does the proposal involve any of the following?						
Yes, on the development site	If yes, you will need to submit an appropriate contamination assessment with your application.						
Yes, on land adjacent to or near the proposed development No	Land which is known to be contaminated? Yes No						
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site? Yes No						
Yes, on the development site	A proposed use that would						
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination? Yes No						
No							
15. Trees and Hedges	16. Trade Effluent						
Are there trees or hedges on the proposed development site?	Does the proposal involve the need to dispose of trade effluents or waste?						
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal						
proposed development site that could influence the development or might be important as part	of trade effluents or waste						
of the local landscape character? Yes No If Yes to either or both of the above, you may need to provide a full	Territorio de la constanta de						
Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be	Tanana karanga						
submitted alongside your application. Your local planning	Terminologies de la constitución						
authority should make clear on its website what the singley should contain, in accordance with the current 'BS5837: Trees in relation to	Management of the Control of the Con						

17. Residential Units (Including Conversion) Does your proposal include the gain, loss or change of use of residential units? Yes No If Yes, please complete details of the changes in the tables below:															
Proposed Housing						Existing Housing									
Market Housing	Not known	1	Num 2	ber o		rooms Unknowr	Total	Market Housing	Not	 	Num 2	ber o	F Bedi	rooms Unknown	Total
Houses					1		1	Houses		<u> </u>	+-	† -	1	CHAROWI	
Flats and maisonettes	s 🗆			1	1			Flats and maisonettes	s \Box	T	 	\dagger	T	 	
Live-work units					1			Live-work units	Tu	 		T	t^-	-	
Cluster flats								Cluster flats	to	T	1	T	T	†	
Sheltered housing			1		†		1	Sheltered housing	10	T	\dagger	 	†	 	
Bedsit/studios				1	†			Bedsit/studios			+	\vdash	I	 	
Unknown type			T	1	T			Unknown type	$+\overline{n}$		1	 	\vdash		
	T	otals	(a+	b+c+	d+e	+f+g)=	1		T	otals	(a+1)	1++++	d+e	(+f+q)=	0
<u> </u>		*********									,,,,,,,,	, , , ,	<u> </u>	17.97	
Social Rented	Not known	1	Num 2	ber of		ooms Unknown	Total	Social Rented	Not known	1	Num 2	ber of		ooms Unknown	Total
Houses			T					Houses		<u> </u>	 -	<u> </u>	 		
Flats and malsonettes								Flats and maisonettes			†				
Live-work units				1				Live-work units		 	 		<u> </u>		
Cluster flats				T				Cluster flats	一	 					
Sheltered housing								Sheltered housing			 	-			
Bedsit/studios			1					Bedsit/studios							
Unknown type			†					Unknown type			 				
	To	otals	(a+t))+c+	d+e	+f+g)=			T	otals	(a+b	+ C+	d+e	+f+g)=	
				**********	********		<i>'</i>								
Intermediate	Not known	1	Num 2	oer of		ooms Unknown	Total	Intermediate	Not known	1	Numt 2	per of		ooms Unknown	Total
Houses			<u> </u>					Houses							
Flats and maisonettes								Flats and maisonettes							
Live-work units								Live-work units							
Cluster flats								Cluster flats							
Sheltered housing		***************************************						Sheltered housing							
Bedsit/studios								Bedsit/studios							
Unknown type								Unknown type							
*	To	tals	(a + b	+ + + +	d+e-	+f+g)=			To	otals	(a + b	+ + + + + + + + + + + + + + + + + + + +	d+e	+f+g)=	
Key worker	Not known	1	Numb 2	er of		oms Unknown	Total	Key worker	Not known	1	Numb	er of		oms Unknown	Total
Houses		-				OTTATION .		Houses		'	2	3	4+	Unknown	
Flats and maisonettes	一計							Flats and maisonettes							
Live-work units	a							Live-work units	-51						
Cluster flats	d	-						Cluster flats		-					Number 1
Sheltered housing			###					Sheltered housing			and the same of th	-			
Bedsit/studios							$-\parallel$	Bedsit/studios							\parallel
Unknown type					-			Unknown type							
7,5		tals	(a + h	+ (+ /	1+01	+ f + g) =		Considerit type		+=1-	(0.1.6		4, -	(6) (1)	
			, - 1 0	1 %	6 7	9/ - 1		***************************************	10	cais (u+0	T C + (1+6+	$+f+g\rangle =$	
Total proposed re	Total proposed residential units $(A+B+C+D)=\begin{bmatrix} 1 \end{bmatrix}$ Total existing residential units $(E+F+G+H)=\begin{bmatrix} 0 \end{bmatrix}$														
#u : TOTAL NET GAIN or LOSS of RESIDENTIAL UNITS (Proposed Housing Grand Total - Existing Housing Grand Total) 1															

18. All Types of Development: Non-residential Floorspace								
Does your proposal involve the loss, gain or change of use of non-residential floorspace? Yes No If you have answered Yes to the question above please add details in the following table:								
	se class/type of use	T				Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)	
A 1	Shops					<u> </u>		
	Net tradable area:				,			
A2	Financial and professional services							
A3	Restaurants and cafes							
A4	Drinking establishments							
A5	Hot food takeaways							
B1 (a)	Office (other than A2)							
B1 (b)	Research and development							
B1 (c)	Light industrial						and the state of t	
82	General industrial							
88	Storage or distribution							
C1	Hotels and halls of residence							
C2	Residential institutions			····				
D1	Non-residential institutions							
D2	Assembly and leisure							
OTHER		П						
Please								
Specify	Total							
In ad	dition, for hotels, resident	lal ins	ititutions and ho	stels, please add	ditionally inc	licate the loss or gain of	rooms	
			ng rooms to be l of use or dem	ost by change	Total room	is proposed (including langes of use)	Net additional rooms	
C1	Hotels							
C2	Residential Institutions							
OTHER								
Please Specify		-						
	ployment omplete the following info	nrmal	ion regarding er	nnlovees:	oodskooringsgestelevering in the ground program of the section of the control of			
			Full-time		time		al full-time	
Ex	isting employees		0	0		equivalent 0		
	Proposed employees 0			0			0	
20. Hours of Opening Please state the hours of opening for each non-residential use proposed:								
ried			y to Friday	Saturda		Sunday and	Not known	
			,,	and the state of t		Bank Holidays		
						kirjan mineman naja menemuum siimmalaskisinen delektrikisin delikistäädelektrikisin Filmandolis delektrikisin	isa dawan, dawa isa garan ka taran isa galang dag canga canindoro iliki da alam kanda ika da amanda ika da amanga uru mini manganin pem	
21. Site Area Please state the site area in hectares (ha) 02.74 HECTARES								
50ate: 2013-04-30 #\$ \$Revision: \$5045								

22. Industrial or Commercial Processes and Machinery								
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:								
Is the proposal a waste management development? Yes No								
If the answer is Yes, please complete the foll	owing	j table:						
	Not applicable	The total capacity o including engineering allowance for cover tonnes if solid was	g surcharge or restoration	and making no on material (or	Maximum annual operational throughput in tonnes (or litres if liquid waste)			
Inert landfill			 					
Non-hazardous landfill								
Hazardous landfill			vientes emblementatory, solicita y dia saryamana ami					
Energy from waste incineration			to the constant to produce the constant					
Other incineration								
Landfill gas generation plant					:			
Pyrolysis/gasification								
Metal recycling site								
Transfer stations								
Material recovery/recycling facilities (MRFs)	Ш							
Household civic amenity sites								
Open windrow composting								
In-vessel composting								
Anaerobic digestion								
Any combined mechanical, biological and/ or thermal treatment (MBT)								
Sewage treatment works								
Other treatment								
Recycling facilities construction, demolition and excavation waste								
Storage of waste					7,440			
Other waste management			visus manus van e n en		ddaecenin de en			
Other developments								
Please provide the maximum annual operation	onal t	hroughput of the follo	wing waste	streams:				
Municipal								
Construction, demolition and ex		tion						
Commercial and industri	al							
Hazardous	********							
If this is a landfill application you will need to planning authority should make clear what is	nforn	ide further information lation it requires on its	n before you website.	ir application can	be determined. Your waste			
23. Hazardous Substances								
Does the proposal involve the use or storage the following materials in the quantities state			^a No	Not applicab	ple			
If Yes, please provide the amount of each sub		9000	out.	Topour				
Acrylonitrile (tonnes)	Et	hylene oxide (tonnes)			Phosgene (tonnes)			
Ammonia (tonnes)	Hydro	ogen cyanide (tonnes)		Sul	phur dioxide (tonnes)			
Bromine (tonnes)	L	quid oxygen (tonnes)			Flour (tonnes)			
Chlorine (tonnes) Liq	Chlorine (tonnes) Liquid petroleum gas (tonnes) Refined white sugar (tonnes)							
Other:		0	ther:					
Amount (tonnes):		A	mount (toni	nes):				

24. Ownership Certificates and Agricultural Land Declaration One Certificate A, B, C, or D, must be completed with this application form **CERTIFICATE OF OWNERSHIP - CERTIFICATE A** Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding** NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act. Date (DD/MM/YYYY): Or signed - Agent: Signed - Applicant: CERTIFICATE OF OWNERSHIP - CERTIFICATE B Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12 I certify/ The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day before the date of this application, was the owner* and/or agricultural tenant** of any part of the land or building to which this application relates. * "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run. ** "agricultural tenant" has the meaning given in section 65(8) of the Town and Country Planning Act 1990 Date Notice Served Name of Owner / Agricultural Tenant Address 19/11/2013 Lane House, 24 Parsons Green Lane, London SW6 4HS. Caenwood Court Freehold Limited Date (DD/MM/YYYY): Or signed - Agent: • Signed - Applicant: FOR WITHERS LLP 19/11/2013

26. Declaration I/we hereby apply for planning permission/consolinformation. I/we confirm that, to the best of my, genuine opinions of the person(s) giving them. Signed - Applicant:	ent as described in th /our knowledge, any Or signed - Agent:	Date (DD/MM/YYYY): FOR WITHERS [19'/11/2013] (date cannot be pre-application)
27. Applicant Contact Details		28. Agent Contact Details
Telephone numbers	n.co.co.co.co.co.co.co.co.co.co.co.co.co.	Telephone numbers
Country code: National number:	Extension number:	Country code: National number: Extension number: 02075976177
Country code: Mobile number (optional):		Country code: Mobile number (optional):
Country code: Fax number (optional):		Country code: Fax number (optional):
Email address (optional):		Email address (optional):
		JEREMY.WAKEHAM@WITHERSWORLDWIDE.COM
29. Site Visit Can the site be seen from a public road, public for lifthe planning authority needs to make an appoout a site visit, whom should they contact? (Please If Other has been selected, please provide: Contact name:	intment to carry	other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details) Telephone number:
Email address:		