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Application for Planning Permission. Town and Country Planning 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 N	ame, Ad	dress a	nd Contact Deta	ails				
Title: Mr	First	name:	Mark		Surname:	Ward		
Company name								
Street address:	Great Ormond Street Hospital,			Country Code	National Number	Extension Number		
	Level 4, Y	ork House	9		Telephone number	:		
					Mobile number:			
Town/City	London				- Fau munch an] [
County:					Fax number:			
Country:					Email address:			
Postcode:	WC1N 3B	BH						
Are you an agent a	cting on be	ehalf of th	e applicant?	○ Yes	No			
2. Agent Name	e, Addres	ss and (Contact Details					
No Agent details w	ere submit	ted for th	is application					
3. Description	of the Pr	roposal						
			nent including any c					
The installation of a	a steel plan	t deck wit	h air handling plant	above an existing flat roo	f at 3rd Floor Level not v	visible from the pub	olic highway.	
Has the building, w	ork or char	nge of use	e already started?	Yes (No			
4. Site Address	s Details							
Full postal address	of the site	(including	g full postcode where	e available)	Description:			
House:			Suffix:					
House name:	Great Orn	mond Stre	et Hospital,					
Street address:	Great orm	nond Stre	et					
Town/City:	London							
County:								
Postcode:	WC1N 3JI	Н						
Description of loca (must be complete	tion or a gr	rid referen de is not k	ice known):					
Easting:		530441						
Northing:	1	181919						

Has assistance or prior advice been sought from the local authority about this application?

6. Pedestrian and Vehicle Access, Roads and Rights of Way								
Is a new or altered vehicle access proposed to or from the public highway? Yes No								
Is a new or altered pedestrian access proposed to or from the public highway? Yes No								
Are there any new public roads	to be provided within the	e site? Yes •	No					
- '	•		Yes No					
	Are there any new public rights of way to be provided within or adjacent to the site? Yes No No No No No							
Bo the proposals require any an	versions/ extinguishments	diano decition of rights of way.	(163 (116					
7. Waste Storage and Co	ollection							
Do the plans incorporate areas	to store and aid the collec	tion of waste?	es No					
Have arrangements been made	for the separate storage a	and collection of recyclable waste?	◯ Yes ⑥ No					
8. Authority Employee/I	Vlember							
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member Do any of these statements apply to you? Yes No								
9. Materials								
Please state what materials (inc	luding type, colour and na	ame) are to be used externally (if appli	cable):					
Others - description:								
Type of other material:	ype of other material: Plant and Equipment							
Description of existing materials and finishes:								
The proposed loaction for the Plant Deck is over a small semi recessed asphalt flat roof between two buildings, Frontange Building and the Variety Club Building. The Frontage Building elevation is constructed in yellow stock bricks with recessed white uPVC windows. The Variety Club Building is, in this part, finished in buff and brown bricks with brown colour coated aluminium windows and curtain wall.								
Description of <i>proposed</i> materials and finishes:								
The proposed plant deck will have a galvanised finish but it will be screened from the main entrance by an extension of the curtain walling facade set off the existing facade to provide a void inwhich the supply ducts can also be concealed.								
Are you supplying additional information on submitted plan(s)/drawing(s)/design and access statement? Yes No								
If Yes, please state references for the plan(s)/drawing(s)/design and access statement:								
Site Location Plan 110068/05H/P001: Site Plan 110068/05/P002: Exizting Plan 110068/05H/P003: Proposed Plan 110068/05H/P004: Existing Elevation 110069/05/P005: Proposed Plan 110068/05H/P006: Existing Section 110068/05/P007: Proposed Section 110068/05/P008: 3D Views 110068/05/P009								
10. Vehicle Parking								
Please provide information on t	he existing and proposed	number of on-site parking spaces:						
Type of vel	hicle	Existing number	Total proposed (including spaces	Difference in				
Cars		of spaces	retained) 0	spaces 0				
Light goods vehicles/put	 olic carrier vehicles	0	0	0				
Motorcyc		50	50	0				
Disability sp	oaces	0	0	0				
Cycle spa	ces	0	0	0				
Other (e.g.		4	4	0				
Short descriptio	n of Other		Ambulance					
11. Foul Sewage								
Please state how foul sewage is to be disposed of:								
Mains sewer	X See dispessed on	Package treatment plant	Unknown					
Septic tank Other		Cess pit						
Are you proposing to connect to	o the existing drainage sy	stem? • Yes	No C Unknown					
-		the application drawings and state re						
If a foul connection is required i	t will be conndected to th	e hospital's existing internal drainage	system.					

12. Assessment of Flood Risk							
Is the site within an area at risk of flooding? (Refer to the 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.) Yes No							
If Yes, you will need to submit an appropriate flood risk assessment to consider the risk to the proposed site.							
Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?							
Will the proposal increase the flood risk elsewhere? Yes No							
How will surface water be disposed of?							
Sustainable drainage system Main sewer Pond/lake							
Soakaway Existing watercourse							
13. Biodiversity and Geological Conservation							
To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological 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 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:							
a) Protected and priority species							
Yes, on the development site Yes, on land adjacent to or near the proposed development No							
b) Designated sites, important habitats or other biodiversity features							
Yes, on the development site Yes, on land adjacent to or near the proposed development No							
c) Features of geological conservation importance							
Yes, on the development site Yes, on land adjacent to or near the proposed development No							
14. Existing Use							
Please describe the current use of the site: Flat Roof over clinical space.							
Is the site currently vacant? Yes No							
Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application.							
Land which is known to be contaminated? Yes No Land where contamination is suspected for all or part of the site? Yes No							
A proposed use that would be particularly vulnerable to the presence of contamination? Yes No Yes No							
15. Trees and Hedges							
Are there trees or hedges on the proposed development site? Yes No							
And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes No							
If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'.							
16. Trade Effluent							
Does the proposal involve the need to dispose of trade effluents or waste? Yes No							
17. Residential Units							
Does your proposal include the gain or loss of residential units? Yes No							
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							

19. Employment									
If known, please complete the following i	information regarding en	nployees:							
	Full-time	Part-time		Equivalent number of full-time					
Existing employees	3381	256		170					
Proposed employees	3381	256		170					
20. Hours of Opening									
If known, please state the hours of opening	ng for each non-residenti	al use proposed:							
Monday to Frida	ay	Saturda	ny	Sun	Not				
	d Time	Start Time	End Time	Star	Start Time End Time		Known		
D1									
21. Site Area									
What is the site area?									
39.00	sq.metres								
22. Industrial or Commercial Pr	ocesses and Machi	nery							
Please describe the activities and process		d out on the site and t	he end products in	ncluding plant, ventil	lation or air coi	nditioning. Please ir	nclude the		
type of machinery which may be installed. The additional plant is required to achieve		auallity and auantity i	n clinical areas with	nin the hospital. The	nlant will con	sist of an air handlin	ng unit and		
an air source chiller plus their associated			Ti ciii iicai ai eas witi	iiii tile nospitai. Tile	piant will con	isist of all all flatium	ig driit and		
Is the proposal for a waste management of	development?	O ,	Yes No						
23. Hazardous Substances									
Is any hazardous waste involved in the pr	oposal? (Yes • No							
24. Site Visit							==		
24. Site visit									
Can the site be seen from a public road, p	oublic footpath, bridleway	y or other public land?	1	○ Yes • I	No				
If the planning authority needs to make a	in appointment to carry c	out a site visit, whom s	hould they contact	? (Please select only	one)				
The agent • The applicar	nt Other person	I							
25. Certificates (Certificate A)									
23. Oci finicates (oci finicate A)	(Certificate of Owners	hip - Certificate A						
Town and Count I certify/The applicant certifies that on the	ry Planning (Developme e day 21 days before the c						rith a		
freehold interest or leasehold interest with a relates is, or is part of, an agricultural hold	at least 7 years left to run) o	of any part of the land	to which the applic	cation relates, and th	at none of the	land to which the a	application		
Total 65 15, of 15 part of, an agricultural riola	g (agriculturar riolaling	Thas the meaning give		- agricu		13001101100(0) 01 1110	7101).		
Title: Mr First name: C	Christopher		Surname:	Grayson					
Person role: Agent	Declaration d	ate: 22/10/2	013		Declaration r	made			
26. Declaration									
20. Declaration									
I/wa haraby apply for planning parmission	n/concept as described in	, thic form and the acc	omnanyina nlanc/a						
I/we hereby apply for planning permission additional information. I/we confirm that,	to the best of my/our kn	owledge, any facts sta							
	to the best of my/our kn	owledge, any facts sta			⊠ Da	ate 22/10/2013			
additional information. I/we confirm that,	to the best of my/our kn	owledge, any facts sta			⊠ Da	ate 22/10/2013			