

Email: [planning@camden.gov.uk](mailto:planning@camden.gov.uk)  
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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  
 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**

Title:  First name:  Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number:  Country Code:  National Number:  Extension Number:

Mobile number:

Fax number:

Email address:

Are you an agent acting on behalf of the applicant?  Yes  No

**2. Agent Name, Address and Contact Details**

Title:  First Name:  Surname:

Company name:

Street address:

Town/City:

County:

Country:

Postcode:

Telephone number:  Country Code:  National Number:  Extension Number:

Mobile number:

Fax number:

Email address:

### 3. Site Address Details

Full postal address of the site (including full postcode where available)

House:  Suffix:

House name:

Street address:

Town/City:

County:

Postcode:

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

Easting:

Northing:

Description:

### 4. Pre-application Advice

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

Yes  No

### 5. Description of Proposal

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

CHANGE OF USE FROM NURSES' HOSTEL (SUI GENERIS) TO RESIDENTIAL (USE CLASS C3) (1 X 3 BEDROOM MAISONETTE & 3 X 1 BEDROOM FLAT) AND ASSOCIATED ALTERATIONS, INCLUDING REMOVAL OF SUB DIVISION WALLS.

Application reference number:

Date of decision:

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

Condition number(s):

5 - PRIOR TO THE COMMENCEMENT OF DEVELOPMENT A FEASIBILITY STUDY DETAILING MEASURES TO MITIGATE AGAINST EXTERNAL NOISE LEVELS SHALL BE SUBMITTED TO AND APPROVED IN WRITING BY THE LOCAL PLANNING AUTHORITY.

Has the development already started?  Yes  No

### 6. Discharge of Condition(s)

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

EXTERNAL NOISE FEASIBILITY STUDY

### 7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition?

Yes  No

### 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  The applicant  Other person

### 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.

Date