

## Application for a non-material amendment following a grant of 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.

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. Applicant Name and Address				
Title:	First name:			
Last name:				
Company (optional):	UCL ESTATES			
Unit:	House House suffix:			
House name:				
Address 1:	C/O AGENT			
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:				

2. Agent Name and Address				
Title:	First name:			
Last name:				
Company (optional):	DP9			
Unit:	House number: 100 House suffix:			
House name:				
Address 1:	PALL MALL			
Address 2:				
Address 3:				
Town:	LONDON			
County:				
Country:				
Postcode:	SW1Y 5NQ			



3. Site A	ddress Details		4. Pre-application Advice			
Please provide the full postal address of the application site.			Has assistance or prior advice been sought from the local			
Unit:	House number:	House suffix:	authority about this application?	✓ Yes No		
House name:	THE WINDEYER BUILDING		If Yes, please complete the following you were given. (This will help the au			
Address 1:	46 CLEVELAND STREET		application more efficiently).  Please tick if the full contact details a	application more efficiently).		
Address 2:			known, and then complete as much a			
Address 3:			Officer name:  CONOR MCDONAGH			
Town:	LONDON		Reference:			
County:						
Postcode (optional):	W1P 4JF		Date of advice (DD/MM/YYYY	:		
Description	of location or a grid reference ompleted if postcode is not	nce. known):	Details of pre-application advice rece			
Easting:		thing:	VARIOUS EMAIL CORRESPONDENCE			
Description	n:					
5. Eligib	ility					
Do you, or t	the person on whose behalf	you are making this applic	ation,	No		
have an inte	erest in the part of the land	to which this amendment r	elates?			
If you hav	ve answered No to thi	s question, you canno	ot apply to make a non-material a	mendment.		
ı <b>c</b>	ot the sole owner, has notifi	ication under article 0 of the	DMPO been given?	No Not Applicable		
ir you are no	ot the sole owner, has notin	cation under article 9 or the	E DIVIPO Been given:	No Not Applicable		
If you hav	ve answered No to thi	s question, you canno	ot apply to make a non-material a	mendment.		
If you have	answered Yes to this questi	on, please give details of pe	ersons notified:			
	Person Notified		Address	Date of Notification		
C ALha	rity Employee / Meml	nor				
	rity Employee / Meml		a any of those statements and the series			
With respe	ority Employee / Meml ect to the Authority, I am: ber of staff		o any of these statements apply to you?			
With respe (a) a mem (b) an elec	ect to the Authority, I am: ber of staff ted member		o any of these statements apply to you?  Yes  No			
With respe (a) a mem (b) an elec (c) related	ect to the Authority, I am: ber of staff ted member to a member of staff		_			
With respe (a) a mem (b) an elec (c) related	ect to the Authority, I am: ber of staff ted member		_			
With respe (a) a mem (b) an elec (c) related (d) related	ect to the Authority, I am: ber of staff ted member to a member of staff	D	_			
With respe (a) a mem (b) an elec (c) related (d) related	ect to the Authority, I am: ber of staff ted member to a member of staff I to an elected member	D	_			
With respe (a) a mem (b) an elec (c) related (d) related	ect to the Authority, I am: ber of staff ted member to a member of staff I to an elected member	D	_			



7. Description Of Your Proposal				
Please provide a description of the approved developme date of decision in the sections below. Please also provide			ion reference number and	
PLEASE REFER TO SCHEDULE 1				
D. G. van van kara		Data of decision (DD/MMA)		
Reference number: 2011/1944/P		Date of decision (DD/MM/YYYY): 31/08/2011		
2011/1944/F		31/00/2011		
What was the original application type?: (e.g. 'Full', 'Householder and Listed Building', 'Outline')	FULL			
For the purpose of calculating fees, which of the following	ng best describes the origi	nal application type?		
Householder development: development to an existing	ng dwelling-house or deve	lopment within its curtilage		
Other: anything not covered by the above category				
8. Non-Material Amendment(s) Sought				
Please describe the non-material amendment(s) you are	seeking to make:			
VARIATION TO THE WORDING OF CONDITION 5. PLEASE REFER TO COVERING LETTER				
Are you intending to substitute amended plans or drawi	ngs?	Yes No		
If Yes, please complete the following:				
Old plan/drawing number(s):				
New plan/drawing number(s):				
Please state why you wish to make this amendment:	<del>-</del>			
TO ALLOW A FULL DETAILED APPLICATION TO BE MADE	FOR THE ARTWORK PROP	POSED FOR THE WEST ELEV	ATION.	



9. Application Requirements - Checklist Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application not being accepted. It will not be accepted until all information required by the Local Planning Authority has been submitted.				
The original and 3 copies of a completed and dated application form:				
The original and 3 copies of other plans and drawings or information necessary to describe the subject of the application:	on 🗾			
The correct fee:				
10. Declaration  I/we hereby apply for planning permission/consent as described in information.  Signed - Applicant:  Or signed - Agen				
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number: number:  020 7004 1700  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):  jenny.turner@dp9.co.uk			
13. Site Visit  Can the site be seen from a public road, public footpath, bridleway If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)	or other public land?			
If Other has been selected, please provide:	Telephone number:			
Contact name:	тегернине пашиет.			

Email address:

## UCL Howland Street Site May 2013

## **Schedule 1: Description of Development (Question 7)**

"Demolition and replacement of the existing scientific academic research and teaching building (Class sui generis) and erection of a six storey building with two basement levels to accommodate a new scientific academic research and teaching building (Class sui generis), including plant enclosures at roof level and a new area of public open space"

