

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://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. Applicant Name and Address	2. Agent Name and Address
Title: <input type="text" value="Mr"/> First name: <input type="text" value="David"/>	Title: <input type="text" value="Mr"/> First name: <input type="text" value="Phil"/>
Last name: <input type="text" value="Bradbury"/>	Last name: <input type="text" value="Hamilton"/>
Company (optional): <input type="text" value="Willmott Dixon Housing Ltd"/>	Company (optional): <input type="text" value="Peter Barber Architects"/>
Unit: <input type="text"/> House number: <input type="text"/> House suffix: <input type="text"/>	Unit: <input type="text"/> House number: <input type="text" value="173"/> House suffix: <input type="text"/>
House name: <input type="text"/>	House name: <input type="text"/>
Address 1: <input type="text" value="Hitchin Road"/>	Address 1: <input type="text" value="Kings Cross Road"/>
Address 2: <input type="text"/>	Address 2: <input type="text"/>
Address 3: <input type="text"/>	Address 3: <input type="text"/>
Town: <input type="text" value="Shefford"/>	Town: <input type="text" value="London"/>
County: <input type="text" value="Bedfordshire"/>	County: <input type="text"/>
Country: <input type="text" value="United Kingdom"/>	Country: <input type="text" value="United Kingdom"/>
Postcode: <input type="text" value="SG17 5JS"/>	Postcode: <input type="text" value="WC1X 9BZ"/>

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:	House number:	52-54	House suffix:
House name:			
Address 1: Mount Pleasant			
Address 2:			
Address 3:			
Town: London			
County:			
Postcode (optional): WC1X 0AL			
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

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible: ☐

Officer name:

Amanda Peck

Reference:

Date (DD/MM/YYYY):

(must be pre-application submission)

Details of pre-application advice received?

### 5. Description Of Your Proposal

Please provide a description of the approved development as shown on the decision letter, including the application reference number and date of decision in the sections below:

The erection of a 3 storey extension to the east, a part 2 part 4 storey extension to the west of the site with roof terraces, new roof extension to the north block, external alterations to the facades, installation of windows and doors, amendment to boundary wall on Mount Pleasant, removal of staircase on Mount Pleasant, the installation of new cycle parking storage area to the front ground floor courtyard and associated works to create a central courtyard with hard and soft landscaping, to provide an additional 21 rooms to existing 31 room hostel (sui Generis).

Reference number: 2011/6016/P Date of decision: 11/05/2012 (Date must be pre-application submission) (DD/MM/YYYY)

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

1.	6 (landscape)	6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

Has the development already started?

☒ Yes ☐ No

If Yes, please state when the development started (DD/MM/YYYY):

Nov 2013  
(internal strip out and selective demo)

(date must be pre-application submission)

Has the development been completed?

☐ Yes ☒ No

If Yes, please state when the development was completed (DD/MM/YYYY):

(date must be pre-application submission)

### 6. Discharge Of Condition

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

Covering letter with additional notes. Landscape drawing 099\_L\_140 C01. Planning Noise Report for Proposed Courtyard Area by Spectrum Acoustic Consultants.

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

Are you seeking to discharge only part of a condition?

☐ Yes ☒ No

If Yes, please indicate which part of the condition your application relates to:

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### 8. Planning 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 being deemed invalid. It will not be considered valid 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: ☒

The correct fee: ☒

### 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.

Signed - Applicant:

Or signed - Agent:



Date (DD/MM/YYYY):

Phil Hamilton For and on Behalf of Peter Barber Architects

18/02/2013

(date cannot be pre-application)

### 10. Applicant Contact Details

Telephone numbers

Country code:

+44

National number:

(0)1462 814455

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

### 11. Agent Contact Details

Telephone numbers

Country code:

+44

National number:

(0)20 7833 4499

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

phil@peterbarberarchitects.com

### 12. 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)

☐ Agent

☒ Applicant

☐ Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: