

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:	<input type="text"/>	First name:	<input type="text"/>
Last name:	<input type="text"/>		
Company (optional):	UNITE GROUP PLC & TRAVIS PERKINS PLC		
Unit:	<input type="text"/>	House number:	<input type="text"/>
		House suffix:	<input type="text"/>
House name:	C/O AGENT		
Address 1:	<input type="text"/>		
Address 2:	<input type="text"/>		
Address 3:	<input type="text"/>		
Town:	<input type="text"/>		
County:	<input type="text"/>		
Country:	<input type="text"/>		
Postcode:	<input type="text"/>		

2. Agent Name and Address			
Title:	MR	First name:	MATTHEW
Last name:	ROE		
Company (optional):	CGMS		
Unit:	<input type="text"/>	House number:	<input type="text"/>
		House suffix:	<input type="text"/>
House name:	7TH FLOOR		
Address 1:	140 LONDON WALL		
Address 2:	<input type="text"/>		
Address 3:	<input type="text"/>		
Town:	LONDON		
County:	<input type="text"/>		
Country:	<input type="text"/>		
Postcode:	EC2Y 5DN		

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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:

Reference:

Date of advice (DD/MM/YYYY):

Details of pre-application advice received:

5. Eligibility

Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates?

Yes No

If you have answered No to this question, you cannot apply to make a non-material amendment.

If you are not the sole owner, has notification under article 9 of the DMPO been given?

Yes No Not Applicable

If you have answered No to this question, you cannot apply to make a non-material amendment.

If you have answered Yes to this question, please give details of persons notified:

Person Notified	Address	Date of Notification
CAMDEN COUNCIL HIGHWAY DEPARTMENT	CAMDEN TOWN HALL, JUDD STREET, LONDON WC1H 9JB	23/11/2012
TRANSPORT FOR LONDON	8TH FLOOR, WINDSOR HOUSE, 50 VICTORIA STREET, LONDON, SW1H 0TL	23/11/2012

6. Authority Employee / Member

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

If yes please provide details of the name, relationship and role

7. Description Of Your Proposal

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

ERECTION OF PART 6,7,8 & 10 STOREY BUILDING COMPRISING 3,877 SQ M BUILDERS MERCHANT (CLASS SUI GENERIS) AT GROUND AND PART MEZZANINE LEVEL AND 563 STUDENT BEDSPACES (CLASS SUI GENERIS).

Reference number:

2011/1586/P

Date of decision (DD/MM/YYYY):

03/10/2011

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 best describes the original application type?

Householder development: development to an existing dwelling-house or development 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:

1. MINOR SHIFTS IN BUILDING LINES AS PART OF THE DESIGN DEVELOPMENT WHICH ACTUALLY REDUCES SLIGHTLY THE BUILDING FOOTPRINT.
2. CHANGES TO THE INTERNAL LAYOUT OF THE BUILDING INCLUDING THE LOCATION OF THE CYCLE STORES.
3. MINOR INFILLING OF SURPLUS SPACE AT THE PODIUM LEVEL TO CREATE AN ADDITIONAL LOBBY AREA.
4. AN ADDITIONAL SINGLE DOOR TO THE SUBSTATION AT GROUND FLOOR LEVEL.
5. THE INCLUSION OF THE LIFT OVERRUNS.

Are you intending to substitute amended plans or drawings?

Yes

No

If Yes, please complete the following:

Old plan/drawing number(s):

SEE COVERING LETTER

New plan/drawing number(s):

SEE COVERING LETTER

Please state why you wish to make this amendment:

DESIGN DEVELOPMENT WHICH HAS RESULTED IN MINOR CHANGES TO THE APPROVED SCHEME.

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:
- The correct fee:

10. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

11. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text" value="0207 583 6767"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	

Email address (optional):

12. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:
<input type="text"/>	<input type="text" value="0207 832 0275"/>	<input type="text"/>
Country code:	Mobile number (optional):	
<input type="text"/>	<input type="text"/>	
Country code:	Fax number (optional):	
<input type="text"/>	<input type="text"/>	

Email address (optional):

MATTHEW.ROB@CGMS.CO.UK/JOANNE.RAMS@CGMS.CO.UK

13. 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: