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| Planning Services |  |
|-------------------|--|
| Camden Town Hall  |  |
| Argyle Street     |  |
| London WC1H 8EQ   |  |

| Email (enquiries only):                                    | env.devcon@camden.gov.uk | For office use |  |
|--|--------------------------|----------------|--|
| Telephone :  | 020 7974 1911            | Date           |  |
| Fax :  | 020 7974 5713            | Payee          |  |
|  |                          | App. No.       |  |
| Application for approval of details reserved by condition. |                          |                |  |

## 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: Mr                                      | First name: Patrick            | Surname: Wa             | atson Hogan  |  |  |
| Company name                                   | TJAC London Guilford LLC       | ]                       |  |  |  |
| Street address:                                | 131 Dummer Street              | ]<br>Telephone number:  | Country National Extension   Code Number Number                      |  |  |
|  |                                |                         |  |  |  |
| Town/City                                      | Brookline                      | Mobile number:          |  |  |  |
| County:  | MA02446                        | Fax number:             |  |  |  |
| Country:                                       | USA                            | Email address:          |  |  |  |
| Postcode:                                      |                                |                         |  |  |  |
|  |                                | O No                    |  |  |  |
| 2. Agent Name                                  | e, Address and Contact Details |                         |  |  |  |
| Title: Mr                                      | First Name: Antony             | Surname: Ca             | in   |  |  |
| Company name:                                  | Casson Conder Partnership      | ]                       |  |  |  |
| Street address:                                | 32A Thurloe Place              | <br>] Telephone number: | Country<br>CodeNational<br>NumberExtension<br>Number+440207 584 4581 |  |  |
|  |                                | Mobile number:          |  |  |  |
| Town/City                                      | London                         | – Fax number:           |  |  |  |
| County:  |                                |                         |  |  |  |
| Country:                                       |                                | Email address:          |  |  |  |
| Postcode:                                      | SW7 2HJ                        | tonycain@cassonconc     | ler.co.uk  |  |  |

| 3. Site Address                            |                    |                             |                              |  |
|--|--------------------|-----------------------------|------------------------------|--|
| Full postal address                        | of the site (inclu | ding full postcode wher     | e available)                 | Description:                                       |
| House:                                     | 76                 | Suffix:                     |                              | Site comprises numbers 74-76 Guilford Street       |
| House name:                                |                    |                             |                              |  |
| Street address:                            | GUILFORD STR       | EET                         |                              |  |
|  |                    |                             |                              |  |
| Town/City:                                 | LONDON             |                             |                              |  |
| County:                                    |                    |                             |                              |  |
| 5  | WC1N 1DF           |                             |                              |  |
| Postcode:                                  |                    |                             |                              |  |
| Description of locat<br>(must be completed |                    |                             |                              |  |
| Easting:                                   | 53030              |                             |                              |  |
| 0  | 18210              |                             |                              |  |
| Northing:                                  | 10210              |                             |                              |  |
| 4. Pre-applicat                            | ion Advice         |                             |                              |  |
|  |                    | sought from the local a     | uthority about this applicat | ion? () Yes (•) No                                 |
| 5. Description of                          | of Proposal        | -                           |                              |  |
| 5. Description d                           | n Froposai         |                             |                              |  |
| Please provide a de                        | scription of the   | approved development        | as shown on the decision le  | etter:   |
| Internal and externa                       | al works associa   | ted with the change of u    | ise from nurses' accommod    | ation to student accommodation.                    |
| Application reference                      | ce number:         | 2010/0910/L                 |                              | Date of decision: 03/06/2010                       |
| Please state the cor                       | ndition number(    | s) to which this applicat   | on relates:                  |  |
| Condition number(                          | s):                |                             |                              |  |
| 4  |                    |                             |                              |  |
| Has the developme                          | nt already starte  | ed? • Yes                   | No If Yes, please            | state when the development was started: 07/09/2009 |
| Has the developme                          | nt been comple     | eted? C Yes                 | No                           |  |
|  |                    |                             |                              |  |
| 6. Discharge of                            | Condition(s        | 5)                          |                              |  |
| Please provide a ful                       | I description an   | d/or list of the materials, | details that are being subm  | nitted for approval:                               |
| Drawings:                                  |                    |                             |                              |  |
| 1101/<br>D 010 - Proposed In               | ternal Door Det    | ails                        |                              |  |
| D 011 - Proposed Sk<br>D 012 - Proposed Fr | kirtings and Cor   | nice                        |                              |  |
| D 013 - Proposed Fr                        | ont Door Detail    |                             |                              |  |
| D 014 - Proposed W<br>D 015 - Proposed Ba  |                    | Details                     |                              |  |
|  | , ,                |                             |                              |  |
| 7. Part Discharg                           | ge of Condit       | ion(s)                      |                              |  |
| Are you seeking to                         | discharge only p   | part of a condition?        | • Yes 🔿 I                    | No   |
| If Yes, please indica                      | te which part of   | the condition your appl     | ication relates to:          |  |
| 4a, 4b, 4c, 4d, 4g, 4h                     | 1                  |                             |                              |  |
| 8. Site Visit                              |                    |                             |                              |  |
|  |                    |                             |                              |  |
| Can the site be seer                       | n from a public r  | oad, public footpath, br    | idleway or other public land | d? 💽 Yes 🔿 No                                      |
| If the planning auth                       | nority needs to r  | nake an appointment to      | carry out a site visit, whom | should they contact? (Please select only one)      |
| ○ The agent                                | 🔿 The ap           | oplicant ( Other            | person                       |  |
| If Other has been se                       | elected, please r  | provide:                    |                              |  |
| Contact name:                              | ., p p             |                             |                              |  |
| Title:                                     | First name         | 9:                          |                              | Surname:   |
| Telephone number                           | :                  |                             |                              |  |
| Country code:                              |                    | National number:            |                              | Extension number:                                  |
| Email Address:                             |                    |                             |                              |  |

| 9. Declaration  |      |  |
|---|------|--|
| I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. | ne 🖂 |  |
| Date 23/06/2010   |      |  |