

## Application for Planning Permission. Town and Country Planning Act 1990

## Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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. Applic	ant Name and Address	2. Agent	Name and Address
Title:	MR First name: WHN	Title:	MRS First name: SARAH
Last name:	MONCOCIAN	Last name:	COUNTER
Company (optional):	THE HONOURAGLE SOCIETY OF GRAYS INN	Company (optional):	GUA CRIMLEY LIMITED
Unit:	House number: 8 House suffix:	Unit:	House number:
House name:		House name:	
Address 1:	SOUTH SQUARE	Address 1:	STRATTON STREET
Address 2:		Address 2:	·
Address 3:		Address 3:	
Town:	Lonoon	Town:	64204
County:		County:	
Country:	ENGLAND	Country:	ENGLAND
Postcode:	UXIR SET	Postcode:	M12 82K
3. Descri	ption of the Proposal		
	ribe the proposed development, including any change o	of use:	
INSTAL	CATION OF A SLOPE TO FAC	ILITATE	ACCESS FOR WHELCHAIR
USERS	•		
Has the buil	lding, work or change of use already started?	Yes	
	e state the date when building, we were started (DD/MM/YYYY):		(date must be pre-application submission)
	ding, work or change of use been completed?	Yes	√No
	e state the date when the building, work of use was completed: (DD/MM/YYYY):		(date must be pre-application submission)
Change 0	ase was completed. (DD/WIIW/1111):		\$Date: 2007/08/22 15:20:03 \$ \$Revision: 1:24 \$
			TO THE POST OF THE

4. Site Address Details	5. Pre-application Advice
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local authority about this application?
Unit: House 5 House suffix:	authority about this application?  Yes No
House name: VERUCAM BUILDINGS	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1: GRAYS INN ROAD	application more efficiently).  Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3:	Officer name:
Town: LONDON	VICTORIA FOLLIS
County:	Reference:
Postcode (optional): WIR SLP	CA   2010   ENG   CO613
Description of location or a grid reference. (must be completed if postcode is not known):	Date (DD/MM/YYYY): (must be pre-application submission)
Easting: Northing:	Details of pre-application advice received?
Description:	INITIAL ENQUIRY EMAIL SENT
BARCISTERS CHAMBERS OVER BASEMENT	OUTLINING PROPOSALS
AND GROWND FLOORS AND RESIDENTIAL	, <b>[</b> ]
ACCOMMODATION OVER FIRST, SECOND AND THIRD FLOORS	
The trues takes	
6. Pedestrian and Vehicle Access, Roads and Rights of Way	7. Waste Storage and Collection
Is a new or altered vehicle access proposed	Do the plans incorporate areas to store
to or from the public highway? Yes No	and aid the collection of waste? Yes No
Is a new or altered pedestrian	If Yes, please provide details:
access proposed to or from the public highway?	
Are there any new public roads to be provided within the site?	
Are there any new public	
rights of way to be provided within or adjacent to the site?	
Within or adjacent to the site.	
Do the proposals require any diversions /extinguishments and/or	Have arrangements been made for the separate storage and
creation of rights of way?	collection of recyclable waste?
If you answered Yes to any of the above questions, please show details on your plans/drawings and state the reference of the plan	If Yes, please provide details:
(s)/drawings(s)	
	]
i	
8. Neighbour and Community Consultation	9. Council Employee / Member
Have you consulted your neighbours or	Is the applicant or agent related to
the local community about the proposal? Yes No	any member of staff or elected member of the council?
If Voc. plasse provide details:	
If Yes, please provide details:	If Yes, please provide details:

10. Materials						
If applicable, please sta	te what materials are to be used	d externally. Include type, colour and r	<del></del>			
	Existing (where applicable)	Proposed	Not	Don't Know a	Orawing eferences if pplicable	
Walls				1 0		
Roof			[2	7 🗆		
Windows				7 0		
Doors			2	7 0		
Boundary treatments (e.g. fences, walls)			[ -	7 0		
Vehicle access and hard-standing			[-	1 0		
Lighting				10		
Others (please specify)		METAL PLATE FINIS SLOPE IN BLACK - EXISTING PENCES LIGHTWELL STAIR	TO WATCH	ן כ		
		d plan(s)/drawing(s)/design and acces	is statement?	Yes	☐ No	
	2 , PL - 03 , ACCESS	i)/design and access statement: STATEMENT FOR 5 VERUI	AM BUILDING			
11. Vehicle Parkin	g					
Please provide info	<del></del>	posed number of on-site parking space				
Type of Vehic	le Total Existing	Total proposed (includi spaces retained)	ing	Difference in space		
Cars				0		
Light goods vehi public carrier veh	icles/ nicles			0		
Motorcycles				0		
Disability spac	es			0		
Cycle spaces	5			0		
Other (e.g. Bu	s)			0		
Other (e.g. Bu	s)					

12. Foul Sewage	13. Assessment of Flood Risk
Please state how foul sewage is to be disposed of:  Mains sewer  Cess pit	Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.)
Septic tank Other	☐ Yes ☑ No
Package treatment plant	If Yes, you will need to submit a Flood Risk Assessment to consider the risk to the proposed site.
Are you proposing to connect to the existing drainage system?  If Yes, please include the details of the existing system on the	Is your proposal within 20 metres of a watercourse (e.g. river, stream or beck)?  Will the proposal increase
application drawings and state references for the plan(s)/drawing(s):	the flood risk elsewhere? Yes
	How will surface water be disposed of?
	Sustainable drainage system Existing watercourse
	Soakaway Pond/lake
	Main sewer
14. Biodiversity and Geological Conservation	15. Existing Use
Is there a reasonable likelihood of the following being affected adversely or conserved and enhanced within the application site, or on land adjacent to or near the application site?  a) Protected and priority species:	Please describe the current use of the site:
Yes, on the development site	
	Is the site currently vacant?
Yes, on land adjacent to or near the proposed development	If Yes, please describe the last use of the site:
☑ No	
b) Designated sites, important habitats or other biodiversity features:	
Yes, on the development site	When did this use end (if known)?  DD/MM/YYYY  (date where known may be approximate)
Yes, on land adjacent to or near the proposed development	
√ No	Does the proposal involve any of the following:
	Land which is known to be contaminated? Yes No
c) Features of geological conservation importance:	Land where contamination is suspected for all or part of the site?  Yes  No
Yes, on the development site	A proposed use that would
Yes, on land adjacent to or near the proposed development	be particularly vulnerable to the presence of contamination?
✓ No	If you have answered Yes to any of the above, you will need to submit an appropriate contamination assessment.
16. Trees and Hedges	17. Trade Effluent
Are there trees or hedges on the proposed development site?  Yes No	Does the proposal involve the need to dispose of trade effluents or waste?  Yes  No
And/or: Are there trees or hedges on land adjacent to the	If Yes, please describe the nature, volume and means of disposal of trade effluents or waste
proposed development site that could influence the development or might be important as part of the local landscape character?  Yes  No	Of Gode emidents of waste
If Yes to either or both of the above, you will need to provide a full Tree Survey, with accompanying plan before your application can be determined. Your Local Planning Authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to construction - Recommendations'.	

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18. Residential U							reside	ntial units? Yes							
If Yes, please complete	e details	of th	ne cha	nges	in the	tables be	low:		ا کیا	<b>10</b>					
1	Propo:	sed i	Hous	sing					Existi	ing	Hous	ing			
Market	Not			T		ooms	Total	Market	Not		Num	ber of	Bedr	ooms	Tota
Housing	known	1	2	3	4+	Unknown		Housing	known	1	2	3	4+	Unknown	
Houses Flats and maisonettes		]	├	<u> </u>				Houses			ļ	ļ	<u> </u>	ļ	<u> </u>
Live-work units		ļ	├	<del> </del>				Flats and maisonettes			ļ	ļ	<u> </u>	<u></u>	<u> </u>
	<del>                                     </del>		-					Live-work units			ļ <u> </u>	Ĺ	<u> </u>	<u> </u>	<u> </u>
Cluster flats	<del> </del> _					<del> </del>		Cluster flats			-		ļ		
Sheltered housing			<del> </del>	!	<b>-</b>	-		Sheltered housing			<u> </u>	<u> </u>	<u> </u>		<u> </u>
Bedsit/studios						<u> </u>		Bedsit/studios				ļ <u> </u>	Ц.	<u> </u>	ļ
Unknown type		- 4 - 1 -	(		4			Unknown type							<u> </u>
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	1		A I		n		( <del></del> . î		<del>                                     </del>						
Social Rented	Not known		Numi 2	ger or		ooms Unknown	Total	Social Rented	Not known	1	Num 2	ber of		ooms Unknown	Tota
Houses								Houses		<u> </u>	<del>  -</del>	-	<del>  '''</del>	Olikhowii	
Flats and maisonettes		 1	1	<u> </u>				Flats and maisonettes			ļ	-	<del></del>	<del>  _</del>	<del> </del>
Live-work units			<u> </u>					Live-work units				<del>                                     </del>	<del> </del>	<del> </del>	<del>                                     </del>
Cluster flats								Cluster flats				<del>                                     </del>	<del> </del> -		<del> </del>
Sheltered housing								Sheltered housing					<del> </del> -		<del>                                     </del>
Bedsit/studios			$\vdash$			<del> </del>		Bedsit/studios			<del> </del>	<del> </del>	<del> </del>		<del> </del>
Unknown type			<u> </u>	-				Unknown type				<del>                                     </del>	<del> </del>		<del>                                     </del>
Totals $(a+b+c+d+e+f+g) =$					3,70		otals	(a+b)	) + C +	d+e	+f+q)=	╁			
						<u> </u>	ئـا							9/	
Intermediate	Not		Numl	oer of	Bedr	ooms	Total	Intermediate	Not		Num	ber of	<sup>F</sup> Bedr	ooms	Tota
	known	1	2	3	4+	Unknown			known	1	2	3	4+	Unknown	<u> </u>
Houses			<u> </u>					Houses			<u> </u>		<u> </u>		ļ
Flats and maisonettes	<del> </del>		<del> </del> -					Flats and maisonettes			<del> </del>	ļ	<u> </u>		ļ
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Cluster flats								Cluster flats							
Sheltered housing			<u> </u>	ļ			-	Sheltered housing			ļ		_		
Bedsit/studios			<u> </u>					Bedsit/studios			ļ		<u> </u>		
Unknown type								Unknown type						<u> </u>	
	T	otals	(a + b	+++++	d+e	+ f + g) =			T	otals	(a + Ł	) + c +	· d + e	+f+g)=	
	т						T								T=
Key worker	Not known	$\overline{}$	Numi 2	per of		ooms Unknown	Total	Key worker	Not known	1	Num 2	ber of		ooms Unknown	Total
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Flats and maisonettes					<b></b>			Flats and maisonettes				-	<del> </del>	<u> </u>	<u> </u>
Live-work units			<del> </del> .					Live-work units				<del> </del>	<del> </del>		<del> </del>
Cluster flats			<del>                                     </del>			<del> </del>		Cluster flats			-	1	<del> </del>		
Sheltered housing			-		<b>-</b>	<del>                                     </del>		Sheltered housing					<del> </del>	<del> </del>	-
Bedsit/studios		ļ	<del>                                     </del>	<del>                                     </del>	ļ			Bedsit/studios		<del>                                     </del>	+-	<del> </del>		<del> </del>	<del> </del>
Unknown type		-	<b> </b> -	<del>                                     </del>				Unknown type			<del>                                     </del>	_	<del> </del>	<del>                                     </del>	$\vdash$
Januari Gpc		otals	(a+b)	) <del> </del>	d+0	+f+g)=		O I I I I I I I I I I I I I I I I I I I		otale	(a+1	) + C +	d+e	+f+g)=	
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Total proposed a	residen	tial u	nits	(A +	B + C	+ D) =		Total existing	resider	itial	units	(E -	+ F + C	5 + H) =	
	_	_		-				<u> </u>					r		
TOTAL NET GAIN or	LOSS o	f RES	SIDEN	TIAL	UNIT	S (Propos	ed Ho	using Grand Total - Exis	iting Ho	ousin	g Gra	nd Te	otal):		

19. All	19. All Types of Development: Non-residential Floorspace								
Does your proposal involve the loss, gain or change of use of non-residential floorspace?  Yes  No									
If you have answered Yes to the question above please add details in the following table:									
Us	e class/type of use	Not applicable	Existing gross internal floorspace (square metres)	Gross interna to be lost by use or der (square r	change of nolition	Total gross internal floorspace proposed (including change of use)(square metres)	Net additional gross internal floorspace following development (square metres)		
A1	Shops								
	Net tradable area:		'						
A2	Financial and professional services								
А3	Restaurants and cafes								
A4	Drinking establishment	s 🗆							
A5	Hot food takeaways								
B1 (a)	Office (other than A2)								
B1 (b)	Research and development								
B1 (c)	Light industrial								
B2	General industrial								
B8	Storage or distribution								
C1	Hotels and halls of residence								
C2	Residential institutions								
D1	D1 Non-residential institutions								
D2	Assembly and leisure								
OTHER	Please specify								
	Total	<u></u>							
						dicate the loss or gain of r	ooms		
Use class	Type of use   Not applicable	Exist	of use or dem	ost by change olition	l Total room ch	ns proposed (including hanges of use)	Net additional rooms		
C1	Hotels 🔲			-					
	Residential Institutions								
Other	Hostels								
20 5									
	ployment omplete the following in	forma	tion regarding er	mnlovees:					
Ticase co	Simplect the following it		Full-time		-time	Total full-time	Not known		
Exi	isting employees			1		equivalent			
	posed employees								
	urs of Opening								
Pleas	se state the hours of ope		T	lential use prop	osed:	Cupalana			
	Use N	1onda	y to Friday	Saturda	у	Sunday and Bank Holidays	Not known		
	<del></del>	<del></del> .							
-		-							
22. Site	e Area								
Please st	ate the site area in hecta	res (ha	a)						

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23. Industrial or Commercial Proce	sses and waching	=1 y					
Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site:							
is the proposal a waste management develo	pment? Tes	√ No					
If the answer is Yes, please complete the foll	owing table:						
	including engir	acity of the void in cubic metro neering surcharge and making cover or restoration material d waste or litres if liquid waste	no throughput in tonnes				
Inert landfill							
Non-hazardous landfill							
Hazardous landfill							
Energy from waste incineration							
Other incineration							
Landfill gas generation plant							
Pyrolysis/gasification							
Metal recycling site							
Transfer stations							
Material recovery/recycling facilities (MRFs)							
Household civic amenity sites							
Open windrow composting							
In-vessel composting							
Anaerobic digestion							
Any combined mechanical, biological and/ or thermal treatment (MBT)							
Sewage treatment works							
Other treatment		· · · · · · · · · · · · · · · · · · ·					
Recycling facilities construction, demolition and excavation waste							
Storage of waste							
Other waste management							
Other developments							
Please provide the maximum annual operat	ional throughput of th	e following waste streams:					
Municipal							
Construction, demolition and e	xcavation						
Commercial and indust	rial	,					
Hazardous							
If this is a landfill application you will need t planning authority should make clear what	o provide further infol information it require	rmation before your applications on its website.	on can be determined. Your waste				
24. Hazardous Substances							
Does the proposal involve the use or storage the following materials in the quantities star		√No Not ar	pplicable				
If Yes, please provide the amount of each su		`	-				
Acrylonitrile (tonnes)	Ethylene oxide (to	<del></del>	Phosgene (tonnes)				
Ammonia (tonnes)	Hydrogen cyanide (to	onnes)	Sulphur dioxide (tonnes)				
Bromine (tonnes)	Liquid oxygen (to	onnes)	Flour (tonnes)				
Chlorine (tonnes)	quid petroleum gas (to	onnes) R	efined white sugar (tonnes)				
Other:		Other:					
Amount (tonnes):		Amount (tonnes):					

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25. Certificates	5. Certificates								
One Certificate A, B, C, or D, must be	e completed, tog	gether with the Agricult	ural Holdings Certificate with	this application form					
Town and Country Plan		E OF OWNERSHIP - CER	RTIFICATE A ) Order 1995 Certificate unde						
I certify/The applicant certifies that on the country of the count	ne day 21 days be	fore the date of this appl	ication nobody except myself/	the applicant was the					
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):					
Town and Country Plan I certify/ The applicant certifies that I ha 21 days before the date of this application before the date of the land or build	ning (General De ve/the applicant on, was the owner	has given the requisite n r (owner is a person with a	Order 1995 Certificate under otice to everyone else (as listed	d below) who, on the day					
Name of Owner		Address	<del></del>	Date Notice Served					
THE HOLLOUCABLE SOCIETY	8 SOUTI	4 SOUADE, GRAYE	INN	01/02/2010					
OF GRAY'S INN		01 102 12010							
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):					
TP/ orille									
11.1000				03/03/2010					
l certify/ The applicant certifies that:  Neither Certificate A or B can be issue  All reasonable steps have been take interest or leasehold interest with at le unable to do so.  The steps taken were:	ed for this applica n to find out the r	ation names and addresses of t		son with a freehold					
Name of Owner		Address		Date Notice Served					
Notice of the application has been publ	ished in the follow	wing newspaper	On the following date (whi	th must not be earlier					
(circulating in the area where the land is	situated):		than 21 days before the day	e of the application):					
Cinnal Andrew		0		D. 1- (DD (11112222					
Signed - Applicant:		Or signed - Agent:		Date (DD/MM/YYYY):					

25. Certificates (continued)					
Town and Country Planni		re OF OWNERSHII			r Article 7
I certify/ The applicant certifies that:		evelopment rio	cedure, Order 1	293 Certificate unge	r Article /
<ul> <li>S Certificate A cannot be issued for this a</li> <li>S All reasonable steps have been taken t</li> </ul>	application	names and addres	ses of everyone	else who on the day ?	11 days hefore the date o
this application, was the owner (owner	is a person wit	h a freehold interes	t or leasehold inte	erest with at least 7 vea	rs left to run) of any part
of the land to which this application re The steps taken were:	iates, but i nav	/e/ the applicant no	as been unable t	0 do so.	
The steps taken were.					
Notice of the application has been publish	ed in the follo	wing newspaper	On th	ne following date (whi	ch must not be earlier
(circulating in the area where the land is si			than	21 days before the da	te of the application):
Signed - Applicant:	<del></del>	Or signed - Agen	nt:		Date (DD/MM/YYYY):
	1.		· · · · · · · · · · · · · · · · · · ·		
	AGRICUL	TURAL HOLDINGS	CERTIFICATE		
<b>Town and Country Planni</b> Agricultural Land Declaration - You Must Co	ng (General D Implete Fither	evelopment Proce	edure)Order 19	95 Certificate under	Article 7
(A) None of the land to which the application	cation relates i	is, or is part of, an a	~	ng.	
Signed - Applicant:		Or signed - Agen	it:		Date (DD/MM/YYYY):
		56	/		12/04/2010
B) I have/ The applicant has given the	requisite natio	e to every person	other than myse	If/ the applicant who	on the day21 days
before the date of this application, was a t	enant of an ag	ricultural holding	on all or part of the	ne land to which this a	application relates,
as listed below:  Name of Tenant					Date Notice Served
Name of Ferfanc	· · · · · · · · · · · · · · · · · · ·	^	ddress		Date Notice Served
		·			
				TER TOTAL	1
			<u> </u>	]	
			h	1 4 APR 2010	<b></b>
	•		<u>Ul</u>	1 4 14 15 2010	
				<del></del>	
gned - Applicant:		Or signed - Agen	nt:		Date (DD/MM/YYYY):
		i : 			
		<u> </u>			
26. Planning Application Require	ments - Ch	ecklist			
Please read the following checklist to make	sure you hav	e sent all the inforr	mation in suppor	t of your proposal. Fa	ilure to submit all
information required will result in your app the Local Planning Authority has been sub	dication being	deemed invalid. I	t will not be con	sidered valid until all i	nformation required by
1			The correct fee:		
3 copies of a completed and dated applica	tion form:	Z	3 copies of a des	ign and access statem	nent:
3 copies of the plan which identifies the lai	nd to which		•	ompleted, dated Artic	بي
the application relates drawn to an identification scale and showing the direction of North:	ea		Certificate (Agric	cultural Holdings):	.e ∕
3 copies of other plans and drawings or inf	formation	•	3 copies of the c	ompleted, dated	<b>-</b> ~
necessary to describe the subject of the ap	plication:		Ownership Certi	ficate (A, B, C, or D - a	s applicable):
27. Declaration	(consent as 4	scribad in this fa	m and the second	nanujna njana/d	ac and additional
I/we hereby apply for planning permission information.			iii and the accom	, , ,	
Signed - Applicant:	Or sign	ned - Agent:		Date (DD/MN	<del></del>
		SCL		23/03	2010   (date cannot be
					<u> </u>

28. Applicant Contact Details		29. Agent Co	ntact Details		
Telephone numbers		Telephone numb	ers		
Country code: National number:  (a) 20 7458 7880  Country code: Mobile number (optional):	Extension number:	Country code:	National number (O) 8449 O Mobile number (	optional):	Extension number:
Country code: Fax number (optional):		Country code:	Fax number (opt	ional):	l
Email address (optional):		Email address (op		rimley. Co. Uk	
30. 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 appointmen out a site visit, whom should they contact? ( <i>Please selec</i>	it to carry tonly one)	Agent	Applicant	Other (if diffe	
If Other has been selected, please provide:				<b>2</b> .,	·
Contact name:	<del></del>	Telephone numb	er:		<del></del>
			·		
Email address:					