

Application for listed building consent for alterations, extension or demolition of a listed building.

Planning (Listed Buildings and Conservation Areas 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.

т. Аррис	ant Name and Address	2. Agent Name and Address
Title:	First name:	Title: MR First name: IAN
Last name:		Last name: MILLER
Company (optional):	ARAMO OVERSEAS COMPANY UKIT	Company (optional): TTSP
Unit:	House House suffix:	Unit: House number: 90 - 98 House suffix:
House name:		House name:
Address 1:	26th FLOOR	Address 1: GOSWELL ROAD
Address 2:	CENTRE POINT	Address 2:
Address 3:	103 NEW OXFORD STREET	Address 3:
Town:	LONDON	Town: LONDON
County:		County:
Country:	UNITED KINGDOM	Country: UNITED KINGDOM
Postcode:	WCIA IDD	Postcode: ECIV 7RD

## 3. Description of Proposed Work

Please describe the proposals to alter, extend or demolish the listed building(s):

Refurbishment of 24th floor including lift lobbies, male & female toilets; strip out, refurbishment & fit out far occupation by a new tenant to all office areas of floor

3. Description of Proposed Work (continued)	4. Site Address Details
,	Please provide the full postal address of the application site.
Has the work already started without consent? Yes No	Unit: House number: House suffix:
If Yes, please state when the work was started (DD/MM/YYYY):	name: Address 1: 24th FLOOR
WOIK Was statted (DD/MINV 1111).	
PEB 2010	Address 2: CENTRE POINT
	Address 3: 103 NEW OXFORD STREET
(date must be pre-application submission)	Town: LONDON
Has the work been Yes No	County: Postcode
completed without consent.	Postcode (optional): WCIA IDD  Description of location or a grid reference.
If Yes, please state the date when the work was completed (DD/MM/YYYY):	(must be completed if postcode is not known):
work was completed (DD/WWV 1111).	Easting: Northing:
	Description:
(date must be pre-application submission)	
5. Related Proposals	6. Pre-application Advice
Are there any current applications, previous proposals or demolitions for the site?  Yes  No	Has assistance or prior advice been sought from the local
	authority about this application?  Yes No
If Yes please describe and include the planning application reference number(s), if known:	If Yes, please complete the following information about the advice
Description Reference number	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:
	HANNAH WALKER
	Reference:
	Date (DD/MM/YYYY): (must be pre-application submission)
	Details of pre-application advice received?
	INFORMAL ADVICE VIA E-MAIL -
	26. FEB 2010 - PROPOSATS APPEAR GENERALLY ACCEPPABLE BUT WOULD
	REQUIRE LISTED BUILDING CONSENT.
7 Neighbour and Community Consultation	8. Council Employee / Mambay
7. Neighbour and Community Consultation	8. Council Employee / Member Is the applicant or agent related to
Have you consulted your neighbours or the local community about the proposal? Yes No	any member of staff or elected member of the council?
If Yes, please provide details:	If Yes, please provide details:
	The state of the s

	Existing (where applicable)	Proposed	Not applicable	Don't Know
External walls	N/A	N/A		
Roof covering	N/A	N/A		
Chimney	N/A	N/A	Ø	
Windows	CLEAR GLAZED	UNALTERED		
External doors	n/A	N/A	Ø	
Ceilings	SUSPENDED CEILINGS, PLASTER & PLASTERBOARD	NEW SUSPENDED CEILINGS, PLASTER & PLASTERBOARD		
Internal walls	PLASTERBOARD, PLASTERED BLOCKWORK	NEW PLASTERBOARD, PLASTERED BLOCKWARK, GLAZING:		
Floors	SCREEDED SLAB/TERRAZZO			
Internal doors	HARDWOOD VENEER WITH VISION PANELS	NEW TO MATCH EXISTING REPLACED. ADDITTIONAL GLAZED DOORS TO CELLULAR OFFICES.		
Rainwater goods	N/A	N/A		
Boundary treatments (e.g. fences, walls)	N/A	N/A	Z	
Vehicle access and hard standing	N/A	N/A		
Lighting	EXISTING PLOURESCENT LIGHTS	PLOURESCEN LIGHTS		
Others (add description)	N/A	N/A	Z	
If Yes, please state plan ちょ(07)24 - の	litional information on submitted drawings or plan n(s)/drawing(s) references: ol, AL(07)24-01,02,03,04, n(0)11, AC(07)24-01,02,0	,05, AA(07) 24-01,02,03,	10410	5,01

10. Demolition	11. Listed Building Alterations
Does the proposal include the partial or total demolition of a listed building?  Yes  No	Do the proposed works include alterations to a listed building?
If Yes, which of the following does the proposal involve?	If Yes, do the proposed works include:
a) Total demolition of the listed building: Yes No	(you must answer each of the questions)
b) Demolition of a building within the curtilage of the listed building:  Yes No	a) Works to the interior of the building?
c) Demolition of a part of the listed building: Yes No	b) Works to the exterior of the building? Yes No
If the answer to c) is Yes:	c) Works to any structure or object fixed
i) What is the total volume of the listed building?(cubic metres)	to the property (or buildings within its curtilage internally or externally?  Yes No
ii) What is the volume of the part to be demolished?(cubic metres)	d) Stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?
iii) What was the (approximate) date of the erection of the part to be removed? (MM/YYYY) (date must be pre-application submission)  Please provide a brief description of the building or part of the building you are proposing to demolish:	If the answer to any of these questions is Yes, please provide plans, drawings, photographs sufficient to identify the location, extent and character of the items to be removed, and the proposal for their replacement, including any new means of structural support and state references for the plan(s)/drawing(s):
	SL(07) 24-01,
	AL (07) 24-01, 02, 03, 04, 05
	<b>i  </b>
	AA(07)24-01,02,03,04,05,06,07
	08,09,10,11
Why is it necessary to demolish or extend (as applicable) all or part of the building(s) and or structure(s)?	Ac (07) 24-01,02,03,04,05,06
12. Listed Building Grading	13. Immunity From Listing
Please state the grading (if known) of the building in the list of Buildings of Special Architectural or Historic interest? (Note: only	Has a Certificate of Immunity from Listing been sought in respect of this building?
one box must be ticked)	Yes No Don't know
Grade I Ecclesiastical Grade II	If Yes, please provide the result of the application:
Grade II Ecclesiastical Grade II*	
Grade II* Don't know	
Ecclesiastical Grade I	

14. Certificates				
· One Certif		D, must be completed wi		
		E OF OWNERSHIP - CERT	The second secon	
<b>Certificate under Regulation 6 of the P</b> I certify/The applicant certifies that on t	anning (Listed	Buildings and Conservati	ion Areas) Regulations 1990	alf/ the applicant was the
owner (owner is a person with a freehold	interest or leasel	hold interest with at least 7	plication hobody except myse vears left to run) of any part of	eir/ the applicant was the of the land or building to
which the application relates.			your feet to runy of any part	or the fama or ballaning to
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
	CERTIFICAT	E OF OWNERSHIP - CERT	ICICATE P	
Certificate under Regulation I certify/ The applicant certifies that I have 21 days before the date of this application (left to run) of any part of the land or build	on 6 of the Plani ve/the applicant n, was the owne	ning (Listed Buildings and has given the requisite no or (owner is a person with a t	d Conservation Areas) Regulatice to everyone else (as listed	d below) who, on the day
Name of Owner		Address		Date Notice Served
TARGETFOLLOW (CENTRE	RIVERSI		RIVERSIDE ROAD	23.03.2010
POINT) LTD		I, NORFOLK, N		23.03.2010
		- 140101 0=14 , 70	1 300	
j				J
Signed - Applicant:		Or sig <del>ned Agent:</del>		Date DD/MM/YYYY):
				22 2010
		1494	Sp	23.03.2010
Certificate under Article 7 of	CERTIFICAT	E OF OWNERSHIP - CERT	IFICATE C	
I certify/ The applicant certifies that:  Neither Certificate A or B can be issue  All reasonable steps have been taker interest or leasehold interest with at lea unable to do so.  The steps taken were:	ed for this applic to find out the	ation names and addresses of th	e other owners (owner is a person of a part of it, but I have/t	son with a freehold
Name of Owner		Address	<del></del>	Date Notice Served
				<u></u>
	·			
Notice of the application has been public	shed in the follow	wing newspaper	On the following date (whic	h must not be earlier
(circulating in the area where the land is	situated):	→ F 17	than 21 days before the dat	e of the application):
Signed Applicant		On at a most a most	<u> </u>	D.4. DD 44420000
Signed - Applicant:		Or signed - Agent:		Date DD/MM/YYYY):
	}	i J		] ]

<del></del>		
CERTIFIC artificate under Regulation 6 of the Planning (List	ATE OF OWNERSHIP - CER	TIFICATE D
certify/ The applicant certifies that:	eu bullulligs allu Conserva	tion Areas) Regulations 1990
this application, was the owner (owner is a person i	with a freehold interest or leas	veryone else who, on the day 21 days before the date of sehold interest with at least 7 years left to run) of any part of
the land to which this application relates, but I have he steps taken were:	ve/ the applicant has been ur	hable to do so.
ne steps taken were.	···	
	<i></i>	
lotice of the application has been published in the fo circulating in the area where the land is attuated):	llowing newspaper	On the following date (which must not be earlier than 21 days before the date of the application):
		than 21 days before the date of the applications.
igned - Applicant:	Or signed - Agent:	Date DD/MM/YYYY):
<u>/</u>		
5. Planning Application Requirements - C	- \	
ne Local Planning Authority has been submitted.  copies of a completed and dated application form:  copies of a plan which identifies the land to which	3 copie necessa	s of of other plans and drawings or information ary to describe the subject of the application:
copies of a plan which definites the land to which me application relates drawn to an identified cale and showing the direction of North:	3 copie Owners	s of of the completed, dated ship Certificate (A, B, C, or D - as applicable):
6. Declaration we hereby apply for planning permission/consent as aformation.	described in this form and th	ne accompanying plans/drawings and additional
	gned - Agent:	Date (DD/MM/YYYY):
	Mu Hsp	23.03.2010 (date cannot be pre-application)
7. Applicant Contact Details	18 Agen	et Contact Details
·	TO. Agen	t Contact Details
DISPROPA BURNINGS		
elephone numbers	Telephone	
	Extension number: Telephone Country co	Extension
	Extension	de: National number: Extension number:
Country code: National number:	Extension number: Country co	de: National number: Extension number:  (0)207 490 8899
Country code: National number:	Extension number: Country co	de: National number: Extension number:  (0)207 490 8899
ountry code: National number:  ountry code: Mobile number (optional):	Extension number: Country co	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (0) 7078 482 432
Country code: National number:  Country code: Mobile number (optional):	Extension number: Country co	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (6) 7078 482 432.  de: Fax number (optional):
ountry code: National number:  Ountry code: Mobile number (optional):  Ountry code: Fax number (optional):	Extension number:  Country co  Country co  Country co  Country co  Country co  A  Country co	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (0) 7078 482 432.
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):	Extension number:  Country co  Country co  Country co  Country co  A  Country co  A  Email addre	Mational number:   Extension number:
ountry code: National number:  ountry code: Mobile number (optional):  ountry code: Fax number (optional):  mail address (optional):	Extension number:  Country co  Country co  Country co  Country co  A  Country co  A  Email addre	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (6) 7078 482 432 .  de: Fax number (optional):  (0) 207 490 5845
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Country code: Fax number (optional):  Country code: Fax number (optional):	Country co  +44  Country co  +44  Country co  +44  Email addre	de: National number:  (0)207 490 8899  de: Mobile number (optional):  (a) 7078 482 432.  de: Fax number (optional):  (b) 207 490 5845  ess (optional):  Ierettsp. com
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Country code: Mobile number (optional):	Country co  +44  Country co  +44  Country co  +44  Email addre  i m i l	de: National number:  (0)207 490 8899  de: Mobile number (optional):  (a) 7078 482 432.  de: Fax number (optional):  (b) 207 490 5845  ess (optional):  Ierettsp. com
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Country code: Mobile number (optional):  Country code: Fax number (optional):  Country code:	Country co  HA4  Country co  HA4  Country co  HA4  Country co  HA4  Email addre  i mil	de: National number:  (0)207 490 8899  de: Mobile number (optional):  (a) 7078 482 432.  de: Fax number (optional):  (b) 207 490 5845  ess (optional):  ler@ttsp.com
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Simail address (optional):  9. Site Visit an the site be seen from a public road, public footpat the planning authority needs to make an appointment a site visit, whom should they contact? (Please select	Country co  HA4  Country co  HA4  Country co  HA4  Country co  HA4  Email addre  i mil	de: National number:  (0)207 490 8899  de: Mobile number (optional):  (a) 7078 482 432.  de: Fax number (optional):  (b) 207 490 5845  ess (optional):  ler@ttsp.com
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Granil address (optional):  9. Site Visit an the site be seen from a public road, public footpat the planning authority needs to make an appointme ut a site visit, whom should they contact? (Please select Other has been selected, please provide:	Country co  H-44  Country co  H-44  Country co  H-44  Country co  H-44  Email addre  i m i l  h, bridleway or other public ont to carry cr only one)  Ager	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (0) 7078 482 432 .  de: Fax number (optional):  (0) 207 490 5845  ess (optional):  ler@ttsp.com  and? Yes No  Applicant Other (if different from the agent/applicant's details
Country code: Mobile number (optional):	Country co  HA4  Country co  HA4  Country co  HA4  Country co  HA4  Email addre  i mil	de: National number:  (0) 207 490 8899  de: Mobile number (optional):  (0) 7078 482 432 .  de: Fax number (optional):  (0) 207 490 5845  ess (optional):  ler@ttsp.com  and? Yes No  Applicant Other (if different from the agent/applicant's details
Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Site Visit  an the site be seen from a public road, public footpat the planning authority needs to make an appointme ut a site visit, whom should they contact? (Please select Other has been selected, please provide:	Country co  H-44  Country co  H-44  Country co  H-44  Country co  H-44  Email addre  i m i l  h, bridleway or other public ont to carry cr only one)  Ager	de: National number;  (0) 207 490 8899  de: Mobile number (optional):  (a) 7078 482 432.  de: Fax number (optional):  (b) 207 490 5845  ess (optional):  ler@ttsp.com  and? Yes No  Applicant Other (if different from the agent/applicant's details)