

Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk

Telephone : 020 7974 1911 Fax : 020 7974 5713 For office use Date Payee

App. No.

Fee

Application for approval of details reserved by condition.

Town and Country Planning Act 1990

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.

1. Applicant Name and Address					
Title:	Mr	First name:	William		
Last name:	Colthorpe				
Company (optional):	Argent (Kings Cross) Ltd, London & Continental Railways & Exel PLC				
Unit:	House number: 5 House suffix:				
House name:	Albany Courtyard				
Address 1:	Piccadilly				
Address 2:					
Address 3:					
Town:	London				
County:					
Country:					
Postcode:	W1J 0	HF			

2. Agent Name and Address					
Title:	Mr	First name:	Nick		
Last name:	Marsh				
Company (optional):	Lawray architects				
Unit:	House number: House suffix:				
House name:	Southbank House				
Address 1:	Black Prince Road				
Address 2:					
Address 3:					
Town:	London				
County:					
Country:					
Postcode:	SE1 7	SJ			

3. Site Address Details			application Advice		
Please provide the full postal address of the application site.		Has assis	stance or prior advice been sought from the local		
Unit:	House House suffix:		y about this application? X Yes No		
House name:	Great Northern Hotel		If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this		
Address 1:			on more efficiently). ck if the full contact details are not		
Address 2:	Address 2:		and then complete as much as possible:		
Address 3:	ess 3:		name: Charles Rose		
Town:	: London		ce:		
County:		Site visit dated 22 Dec 2008			
(optional):			Date (DD/MM/YYYY): (must be pre-application submission)		
Description (must be co	of location or a grid reference. Impleted if postcode is not known):	Details of pre-application advice received?			
Easting: 530043 Northing: 183285		Preliminary selection of Arcade stone paving sample			
Description): 	(West Pennine Gritstone) questioned in context abutting pavement on Pancras Road in differing			
		Yorkstone & Western Concourse in Granite tiles.			
5. Descri	ption Of Your Proposal				
Please prov	ide a description of the approved development as shown	on the de	cision letter, including the application reference number		
and date of Demolition	decision in the sections below: of internal and external elements at ground and bas	sement le	vels and alterations to existing windows to provide		
grade-leve	I pedestrian arcade with openings on all four sides; a	lterations	s to existing windows to provide doorways to retained		
	or foyer; installation of ground f bor shutters in NE e				
	with facilitating pedestrian access and movement		/D-tt		
Reference n	number: 2006/3220/P Date of decision: ethe condition number(s) to which this application relate		submission) (DD/MM/YYYY)		
	ondition 3	6.			
2.		7.			
3.		8.			
4.		9.			
5.		10.			
Has the dev	velopment already started?	X	Yes No		
If Yes, pleas	se state when the development started (DD/MM/YYYY):	(07/04/08 (date must be pre-application submission)		
Has the dev	velopment been completed?		Yes X No		
If Yes, pleas	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:					
Supporting Design Statement with accompanying Sample Photos and reference / illustrative drawings					
7. Part Discharge Of Condition(s)					
Are you seeking to discharge only part of a condition? If Yes, please indicate which part of the condition your application relates to: Yes X No					
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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:	original and 3 copies of other plans and drawings formation necessary to describe the subject of the application:				
The correct fee: N/A					
9. Declaration I/we hereby apply for planning permission/consent as described in the information.	nis form and the accompanying plans/drawings and additional				
Signed - Applicant:	Or signed - Agent:				
	NMG Marsh				
Date (DD/MM/YYYY):					
17/06/09 (date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number: number:	Country code: National number: 44 (0)207 138 3560				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Inoble namber (optional).	I Continue Hamber (optional).				
Country code: Fax number (optional):	Country code: Fax number (optional):				
Email address (optional):	Email address (optional): nickmarsh@lawray.com				
	Thekmarsherawray.com				
12. Site Visit					
Can the site be seen from a public road, public footpath, bridleway or	r other public land? Yes X No				
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) X Agent — Applicant — Other (if different from the agent/applicant's details)					
If Other has been selected, please provide: Contact name:	Telephone number:				
Email address:					
2.11411 4441 6553					