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Application for approval of details reserved by condition. Town and Country Planning Act 1990 Planning (Listed Buildings and Conservation Areas) Act 1990

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

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.

Applicant Name and Address		2. Agent Name and Address
Title:	First name:	Title: First name:
Last name:		Last name:
Company (optional):	UCL ESTATES	Company (optional): DP9 LTD
Unit:	House House number: suffix:	Unit: House number: 100 House suffix:
House name:		House name:
Address 1:	C/O AGENT	Address 1: PALL MALL
Address 2:		Address 2:
Address 3:		Address 3:
Town:		Town: LONDON
County:		County:
Country:		Country:
Postcode:		Postcode: SW1Y 5NQ

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site. House House	Has assistance or prior advice been sought from the local authority about this application?				
oriit: number: suffix:	I les A wo				
House name: THE WINDEYER BUILDING	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1: 46 CLEVELAND STREET ,	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	Reference:				
County:					
Postcode (optional):	Date (DD/MM/YYYY):				
Description of location or a grid reference, (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?				
Easting: Northing: Details of pre-application advice received?					
Description:					
5. Description Of Your Proposal					
Please provide a description of the approved development as shown and date of decision in the sections below:	on the decision letter, including the application reference number				
PLEASE SEE SCHEDULE 1					
Reference number: 2011/1944/P Date of decision: 31/08/2011 (Date must be pre-application					
Please state the condition number(s) to which this application relates:					
1. 17	6.				
2.	7.				
3.	8.				
4.	9.				
5.	10.				
Has the development already started?	Yes No				
If Yes, please state when the development started (DD/MM/YYYY):	(date must be pre-application submission)				
Has the development been completed?	Yes No				
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:					
PLEASE REFER TO COVER LETTER					
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:					

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:				
9. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: DP9 LTD Date (DD/MM/YYYY): (date cannot be pre-application)				
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Extension number: 020 7004 1700 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):			
12. Site Visit Can the site be seen from a public road, public footpath, bridleway or other public land?				
Email address:				

46 CLEVELAND STREET MAY 2014

Schedule 1: Description of Your Proposal (Question 5)

"Demolition and replacement of the existing scientific academic research and teaching building (Class sui generis) and erection of a six storey building with two basement levels to accommodate a new scientific academic research and teaching building (Class sui generis), including plant enclosures at roof level and a new area of public open space"