

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

## 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:	First name:	Surname:				
Company name	Almacantar (Centre Point) Ltd					
Street address:	c/o agent		Country Code	National Number	Extension Number	
		Telephone number:				
		Mobile number:				
Town/City						
County:		Fax number:				
Country:	United Kingdom	Email address:				
Postcode:						
Are you an agent acting on behalf of the applicant?  • Yes • No						
2. Agent Name, Address and Contact Details  Title: Mr First Name: Samuel Surname: Palmer						
Company name:	Gerald Eve LLP					
Street address:	Planning and Development		Country Code	National Number	Extension Number	
	72 Welbeck Street	Telephone number:				
		Mobile number:				
Town/City	London	Fay number:				
County:	London	Fax number:				
Country:	United Kingdom	Email address:				
Postcode:	W1G 0AY	spalmer@geraldeve.co	m			

3. Site Address	Details				
Full postal address	of the site (including full postcode where available)	Description:			
House:	Suffix:				
House name:	Centre Point				
Street address:	101-103 New Oxford Street				
	5-24 St Giles High Street				
Town/City:	London				
County:					
Postcode:	WC1A 1DD				
Description of location or a grid reference (must be completed if postcode is not known):					
Easting:	529886				
Northing:	181366				
4. Pre-applicat	ion Advice	· ·			
Has assistance or pr	rior advice been sought from the local authority about this application	on? Yes • No			
5. Description of	f Proposal				
Please provide a de	scription of the approved development as shown on the decision let	ter:			
		bint Link to flexible retail/restaurant/bar use (Class A1/A3/A4); change of use of			
	to flexible retail/restaurant/bar use (Class A1, A3, A4); alterations and				
Application reference number: 2013/1957/P Date of decision: 01/04/2014					
Please state the condition number(s) to which this application relates:					
Condition number(s):  9 and 10					
Has the developme	ent already started? Yes   No				
6. Discharge of	Condition(s)				
Please provide a ful	I description and/or list of the materials/details that are being submi	tted for approval:			
Please refer to cove	ring letter				
7. Part Dischar	ge of Condition(s)				
Are you seeking to discharge only part of a condition?  Yes  No					
8. Site Visit					
Occupation 11 1					
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 appointment to carry out a site visit, whom should they contact? (Please select only one)					
The agent	☐ The applicant ☐ Other person				
9. Declaration					
	or planning permission/consent as described in this form and the acc				
additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any					
opinions given die t	пе денише ориноть от тте регьон(ъ) дічнід ттеті.	Date 07/05/2014			