

Email: planning@camden.gov.uk
 Phone: 020 7974 4444
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Development Management
 Camden Town Hall Extension
 Argyle Street
 London WC1H 8EQ

Application for removal or variation of a condition following grant of planning permission. 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: | Ms | First name: | Angela | Surname: | Clemo | | |
| Company name: | University College London | | | | | | |
| Street address: | 1-19 Torrington Place | | | Telephone number: | Country Code | National Number | Extension Number |
| | | | | | | | |
| Town/City: | London | | | Mobile number: | | | |
| County: | | | | Fax number: | | | |
| Country: | United Kingdom | | | Email address: | | | |
| Postcode: | WC1E 7HB | | | | | | |
| Are you an agent acting on behalf of the applicant? | | | | <input checked="" type="radio"/> Yes <input type="radio"/> No | | | |

2. Agent Name, Address and Contact Details

| | | | | | | | |
|-----------------|-------------------------------|----------|--|--------------------------|--------------|-----------------|------------------|
| Title: | First Name: | Surname: | | | | | |
| | Matthew | Phillips | | | | | |
| Company name: | Burwell Deakins Architects | | | | | | |
| Street address: | Unit 0.01 California Building | | | Telephone number: | Country Code | National Number | Extension Number |
| | Deals Gateway | | | | 44 | 0208 305 6010 | |
| | | | | Mobile number: | | | |
| Town/City: | London | | | Fax number: | | | |
| County: | | | | Email address: | | | |
| Country: | United Kingdom | | | | | | |
| Postcode: | SE13 7SF | | | mp@burwellarchitects.com | | | |

3. Site Address Details

Full postal address of the site (including full postcode where available)

Description:

| | | | |
|-----------------|--|---------|----------------------|
| House: | <input type="text"/> | Suffix: | <input type="text"/> |
| House name: | <input type="text" value="UCL Lower Refectory"/> | | |
| Street address: | <input type="text" value="Wilkins Building"/> | | |
| | <input type="text" value="Gower Street"/> | | |
| Town/City: | <input type="text" value="London"/> | | |
| County: | <input type="text" value="Camden"/> | | |
| Postcode: | <input type="text" value="WC1E 6BT"/> | | |

Description of location or a grid reference
(must be completed if postcode is not known):

| | |
|-----------|-------------------------------------|
| Easting: | <input type="text" value="529611"/> |
| Northing: | <input type="text" value="182311"/> |

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

Yes No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

| | | | | | |
|---|---|--------------------------------------|------------------------------------|----------|-------------------------------------|
| Officer name: | | | | | |
| Title: | <input type="text" value="Mr"/> | First name: | <input type="text" value="Gavin"/> | Surname: | <input type="text" value="Sexton"/> |
| Reference: | <input type="text" value="Email sent 05/12/14 and response received 11/12/14"/> | | | | |
| Date (DD/MM/YYYY): | <input type="text" value="11/12/2014"/> | (Must be pre-application submission) | | | |
| Details of the pre-application advice received: | | | | | |
| <input type="text" value="Confirmation of the type of application to be submitted."/> | | | | | |

5. Description of Proposal

Please provide a description of the approved development as shown on the decision letter:

Application reference number: Date of decision:

Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started? Yes No If Yes, please state when the development was started:

Has the development been completed? Yes No

6. Condition(s) - Removal

Please state why you wish the condition(s) to be removed or changed:

If you wish the existing condition to be changed, please state how you wish the condition to be varied:

7. 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 appointment to carry out a site visit, whom should they contact? (Please select only one)

The agent The applicant Other person

8. Certificates (Certificate A)

Certificate of Ownership - Certificate A

Town and Country Planning (Development Management Procedure) (England) Order 2010 Certificate under Article 12

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/the applicant was the owner (*owner is a person with a freehold interest or leasehold interest with at least 7 years left to run*) of any part of the land to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding (*"agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act*).

Title: First name: Surname:
Person role: Declaration date: Declaration made

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.

Date