

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 listed building consent for alterations, extension or demolition of a listed building. 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 Na	nme, Ac	dress and C	ontact	Deta	nils							
Title:	Firs	t name: Chri	S				Surname:	Larner				
Company name	The Fou	ndling Museum										
Street address:	40 Bruns	swick Square							Country Code	National Number		Extension Number
							Telephone numbe	er:				
							Mobile number:	Γ				
Town/City	London						Fax number:	Γ				
County:	London						rax number.	L				
Country:	United K	lingdom					Email address:					
Postcode:	WC1N 1	AZ										
Are you an agent ac	ting on b	ehalf of the app	licant?			C Yes (• No					
2. Agent Name	, Addre	ess and Cont	act Det	ails								
No Agent details we	ere submi	itted for this app	olication									
3. Description	of Prop	osed Works										
Please describe the	proposal	s to alter, exten	d or demo	lish th	ne listed buil	ding(s):						
						-	thus advertising the	e museur	n to the pub	lic.		
Has the work alread without planning p			$oldsymbol{eta}$	Yes	🔿 No	lf Yes, pleas	e state the date whe	n the wo	ork started:		15/04/200	4
Has the work already been completed without planning permission? • Yes O No If Yes, please state the date when the work was finished: 30/01/2012					2							
4. Site Address	Details	5										
Full postal address	of the site	e (including full	oostcode	where	available)		Description:					
House:	40		Suffix	(:								
House name:	The Fou	ndling Museum										
Street address:	Brunswi	ck Square										
Town/City:	London											
County:	Camden											
Postcode:	WC1N 1	AZ										
Description of locat (must be completed	ion or a g d if postco	rid reference ode is not know	n):									
Easting:	Į	530403										
Northing:	[182378										

5. Related Proposals
Are there any current applications, previous proposals or demolitions for the site?
If Yes, please describe and include the planning application reference number(s), if known:
2014/4217/L
6. 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: Ms First name: Clipa Surname: Beechook
Reference: RS/PE/En14/1123
Date (DD/MM/YYYY):19/01/2015(Must be pre-application submission)
Details of the pre-application advice received:
I spoke with Clipa Beechook to discuss a previous application that was made. Clipa informed me that this previous application was not fully completed and was withdrawn. Clipa advised me to apply for both listed building consent and advertisement consent.
7. Neighbour and Community Consultation
Have you consulted your neighbours or the local community about the proposal? Yes No
If Yes, please provide details:
As the sign has been in place for a while both 'Coram' and the 'School of Pharmacy' have been aware of the sign for some time now.
8. Authority Employee/Member
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member Do any of these statements apply to you? Yes No
9. Materials
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11. Listed building alterations								
Do the proposed works include alterations to a listed building?	Yes	O No						
If Yes, will there be works to the interior of the building?	⊖ Yes	• No						
Will there be works to the exterior of the building?	Yes	○ No						
Will there be works to any structure or object fixed to the property (or buildings within its curtilage) internally or externally?	Yes	⊂ No						
Will there be stripping out of any internal wall, ceiling or floor finishes (e.g. plaster, floorboards)?	⊖ Yes	• No						
If the answer to any of these questions is Yes, please provide plans, drawings and p removed, and the proposal for their replacement, including any new means of stru								
State references for these plan(s)/drawing(s):								
12. Listed Building Grading								
If known, what is the grading of the listed building (as stated in the list of Buildings of Special Architectural or Historical Interest)?	🔿 Don't	t know 🔿 Grade I 🔿 Grade II* 💿 Grade II						
Is it an ecclesiastical building? On't know Yes	No	,						
13. Immunity from Listing								
Has a Certificate of Immunity from listing been sought in respect of this building?		🔿 Yes 💿 No						
14. Site Visit								
Can the site be seen from a public road, public footpath, bridleway or other public land?								
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								
15. Certificates (Certificate B)								
Certificate Of O								
Certificate under Regulation 6 of the Planning (Lis I certify/The applicant certifies that I have/the applicant has given the reguisite not		-						

I certify/The applicant certifies that I have/the applicant has given the requisite notice to everyone else (as listed below) who, on the day 21 days before the date of this application, 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 or building to which this application relates.

15. Certificates (Certificate B) (continued)

Owner Name:	Velou Singara					Date notice served
Number:	41	Suffix:	House name:		_	
Street:	Brunswick Square	L		19/01/2015		
Locality:	London					
Town:	London					
Postcode:	WC1 1AZ					
Name:						
Number:		Suffix:	House name:			
Street:		L		L		
Locality:						
Town:						
Postcode:]				
Name:						
Number:		Suffix:	House name:			
Street:						
Locality:						
Town:		_				
Postcode:						
Name:						
Number:		Suffix:	House name:			
Street:						
Locality:						
Town:		٦				
Postcode:						
Name:		0.55				
Number:		Suffix:	House name:			
Street:						
Locality:						
Town: Postcode:		7				
tle: Mr	First name:	Chris		urname: Larner	<u> </u>	
erson role:	Applicant	Declaration date:	19/01/2015		\boxtimes	Declaration made

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.

 \boxtimes Date 10/05/2015