

Email: [planning@camden.gov.uk](mailto: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:	<input type="text"/>	First name:	<input type="text"/>	Surname:	<input type="text"/>
Company name:	<input type="text" value="University College London Hospital NHS Foundation Trust"/>				
Street address:	<input type="text" value="c/o Agent"/>			Country Code:	<input type="text"/>
	<input type="text"/>	Telephone number:	<input type="text"/>	National Number:	<input type="text"/>
	<input type="text"/>	Mobile number:	<input type="text"/>	Extension Number:	<input type="text"/>
Town/City:	<input type="text"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text"/>	Email address:	<input type="text"/>		
Country:	<input type="text" value="United Kingdom"/>				
Postcode:	<input type="text"/>				
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:	<input type="text"/>	First Name:	<input type="text" value="Emily"/>	Surname:	<input type="text" value="Cochrane"/>
Company name:	<input type="text" value="JLL"/>				
Street address:	<input type="text" value="30 Warwick Street"/>			Country Code:	<input type="text"/>
	<input type="text"/>	Telephone number:	<input type="text"/>	National Number:	<input type="text" value="0203 147 1632"/>
	<input type="text"/>	Mobile number:	<input type="text"/>	Extension Number:	<input type="text"/>
Town/City:	<input type="text" value="London"/>	Fax number:	<input type="text"/>	<input type="text"/>	<input type="text"/>
County:	<input type="text"/>	Email address:	<input type="text" value="emily.cochrane@eu.jll.com"/>		
Country:	<input type="text" value="United Kingdom"/>				
Postcode:	<input type="text" value="W1B 5NH"/>				

### 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="Former Odeon Site and Rosenheim Building Site"/>		
Street address:	<input type="text" value="Grafton Way"/>		
Town/City:	<input type="text" value="London"/>		
County:	<input type="text" value="Camden"/>		
Postcode:	<input type="text" value="WC1E 6JN"/>		

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

Easting:	<input type="text" value="529384"/>
Northing:	<input type="text" value="182179"/>

### 4. Pre-application Advice

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

Yes  No

### 5. Description of Proposal

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

A full planning application for redevelopment of the former Odeon site and demolition of the Rosenheim Building to provide a Proton Beam Therapy (PBT) cancer treatment facility and day surgery facilities in 4 levels of basement; inpatient medical facilities and a ground floor retail unit (175 sq m approximate GIA) in a 7 storey development above ground (34,596.5 sq m GIA in total) including roof plant, a new pedestrian entrance on corner of Grafton Way and Huntley Street, a new service entrance on Huntley Street, a ground floor drop-off area off Grafton Way, and three roof gardens; and the relocation of the vacuum insulated evaporator (VIE) to University Street frontage inside a new enclosure.

Application reference number:	<input type="text" value="2013/8192/P"/>	Date of decision:	<input type="text" value="22/09/2014"/>
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Please state the condition number(s) to which this application relates:

Condition number(s):

Has the development already started?  Yes  No

### 6. Discharge of Condition(s)

Please provide a full description and/or list of the materials/details that are being submitted for approval:

### 7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition?

Yes  No

### 8. 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

### 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