

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 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 N	ame, Address and Contact Details				
Title: Mr	First name:	Surname:			
Company name	University College London Hospitals Foundation Trust				
Street address:	C/O Agent		Country Code	National Number	Extension Number
		Telephone number:			
		Mobile number:			
Town/City		Fax number:			
County: Country:	United Kingdom	Email address:			
Postcode:					
	e, Address and Contact Details	∩ No			
Title: Mr	First Name: Emily	Surname: Co	chrane		
Company name:	Jones Lang LaSalle				
Street address:	30 Warwick Street		Country Code	National Number	Extension Number
		Telephone number:	44	0203 147	1632
		Mobile number:			
Town/City	London	Fax number:			
County:	London				
Country:	United Kingdom	Email address:			
Postcode:	W1B 5NH	emily.cochrane@eu.jll.	com		

3. Site Address	Details	S																		
Full postal address	of the site	e (including	full postco	de wher	re ava	ilable)	-		Desc	criptior	ר:									
House:	25		S	uffix:																
House name:	Former	Odeon site	and Rosen	heim Bui	ilding															
Street address:	Grafton	Way																		
Town/City:	London																			
County:	Camder	1																		
Postcode:	WC1E 6I	OB																		
Description of locat (must be complete																				
Easting:		529424																		
Northing:		182188																		
	L																			
4. Pre-applicat	ion Adv	vice																		
Has assistance or p	rior advice	e been sou	ght from th	ie local a	uthor	ity abo	out this a	pplicati	on?				ullet	Yes (No				
If Yes, please comp	lete the fo	ollowing in	formation a	about the	e advi	ce you	ı were gi	ven (thi	s will h	elp the	autho	rity t	o deal	with this	app	lication mo	ore efficie	ntly):		
Officer name:																				
Title: Miss	Firs	t name:	Jennifer							Surn	iame:	Wa	alsh							
Reference:	20)13/8192/F)							_										
Date (DD/MM/YYYY): 27	7/04/2015		(Must b	e pre-	-applic	ation su	bmissio	n)											
Details of the pre-a	pplicatior	n advice red	ceived:																	
Please refer to attac	hed cove	ering letter.																		
5. Description of	of Prop	osal																		
•	•																			
Please provide a de	•			•																
Redevelopment of facilities in 4 levels m GIA in total) inclu off area off Grafton	of baseme Iding root	ent; inpatie f plant, a ne	ent medical ew pedestr	facilities an entra	and a nce o	a groui n corn	nd floor i er of Gra	retail un Ifton Wa	it (175 iy and	sq m a Huntle	approxi y Stree	mate t, a n	e GIA) new se	in a 7 sto rvice ent	rey d rance	evelopme on Huntle	nt above	ground	1 (34,596	5.5 sq
Application referen	ce numbe	er: 2	013/8192/)							<u> </u>					Date of o	decision:	22/	/09/2014	1
Please state the cor	ndition nu	⊥ umber(s) to	which this	applicat	ion re	lates:]
Condition number(
Conditions: 5, 8, 12,	15, 22, 2	5, 26, 33 an	d 34																	
Has the developme	nt alread	y started?	(Yes	0	No	If Yes	, please	state v	vhen th	ne deve	elopn	ment v	vas starte	ed:		30)/01/20)15	
Has the developme	nt been o	completed	? (Yes	lacksquare	No														
6. Condition(s)	- Remo	oval																		
Please state why yo	u wish th	e conditio	n(s) to he re	moved	or cha	naed·														
Please refer to attac						ngou.														
If you wish the exist	ting cond	ition to be	changed, p	lease sta	ite ho	w you	wish the	conditi	on to l	oe varie	ed:									
Please refer to attac	hed cove	ering letter.																		
7. Site Visit																				
Can the site be see	n from a p	oublic road	, public foo	tpath, br	idlew	ay or c	other pul	olic land	?			0	• Ye	s ()	No					
If the planning auth	nority nee	ds to make	e an appoin	tment to	o carry	out a	site visit	, whom	should	they a	contact	? (Pl	lease s	elect onl	y one)				
 The agent 	\bigcirc	The applic	ant (Other	perso	on														
	\sim																			

8. Certificates (Certificate A)											
Certificate of Ownership - Certificate A Town and Country Planning (Development Management Procedure) (England) Order 2015 Certificate under Article 14 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 <i>(owner is a person with a freehold interest or leasehold interest with at least 7 years left to run)</i> 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 <i>("agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act)</i> .											
Title: Miss		First name:	Jones Lang LaSalle		Surname:	Jones Lang LaSalle	es Lang LaSalle				
Person role:	Agent		Declaration date:								
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. \square Date 12/05/2015											