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Development Management Regeneration and Planning London Borough of Camden **Judd Street** London WC1H 8ND

Application for Planning Permission. Town and Country Planning 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: | Jodee | Surname: Cod | pper | | | |
| Company name | Queens Square En | terprises | | | | | |
| Street address: | 8-11 Queens Squa | re |] | Country Code | National Number | Extension Number | |
| | | | Telephone number: | | | | |
| | | | Mobile number: | | | | |
| Town/City | London | | Fax number: | | | | |
| County: | | | Tax Hambon | | | | |
| Country: | United Kingdom | | Email address: | | | | |
| Postcode: | WC1N 3AR | | | | | | |
| Are you an agent a | cting on behalf of th | ne applicant? | ○ No | | | | |
| | | | | | | == | |
| 2. Agent Name | e, Address and | Contact Details | | | | | |
| Title: Mr | First Name: | Robert | Surname: McG | Cabe | | | |
| Company name: | Llewelyn Davies | | | | | | |
| Street address: | 3rd Floor | | | Country Code | National Number | Extension Number | |
| | 3-5 Rathbone Plac | e | Telephone number: | | 0207 907 7900 | | |
| | | | Mobile number: | | | | |
| Town/City | London | | Fax number: | | | | |
| County: | | | | | | | |
| Country: | United Kingdom | | Email address: | | | | |
| Postcode: | W1T 1HJ | | b.mccabe@ldavies.com | 1 | | | |
| 3. Description of the Proposal | | | | | | | |
| - | • | | | | | | |
| | | ment including any change of use: n support of an application for permission to exte | end the around floor to th | e rear portion | of The National Hospital for New | urology and | |
| Neurosurgery, 23 C | ueens Square, Lond | don WC1 3AY. | _ | | • | | |
| | | to rear. Currently 3 desk spaces are shared betwo nment. There is no change of use. The building | | | | | |
| | sible from the stree | | | | · · | | |
| Has the building, w | ork or change of us | e already started? Yes • | No | | | | |

004333158

| 4. Site Addres | ss Details | | | |
|---|--|------------------------------------|---------------------------|---|
| Full postal addres | s of the site (includin | g full postcode where ava | ilable) | Description: |
| House: | 23 | Suffix: | | |
| House name: | | | | |
| Street address: | Queen Square | | | |
| | | | | |
| Town/City: | London | | | |
| County: | Camden | | | |
| Postcode: | WC1N 3AY | | | |
| | ation or a grid refere ed if postcode is not | | | |
| Easting: | 530309 | | | |
| Northing: | 182056 | | | |
| | | | | |
| 5. Pre-applica Has assistance or | | ught from the local author | ity about this applicat | ion? Yes • No |
| 6. Pedestrian | and Vehicle Acc | cess, Roads and Rigl | nts of Way | |
| Is a new or altered | d vehicle access prop | osed to or from the public | : highway? | Yes No |
| | | roposed to or from the pu | | Yes • No |
| | | provided within the site? | Yes | |
| _ | | | | |
| _ | | to be provided within or | | Yes No |
| Do the proposals | require any diversior | ns/extinguishments and/o | r creation of rights of v | way? |
| | age and Collect | ion e and aid the collection of | waste? | |
| Have arrangemen | ts been made for the | e separate storage and col | lection of recyclable w | vaste? Yes • No |
| 8. Authority E | imployee/Meml | oer | | |
| (b) an (c) rela | ne Authority, I am: nember of staff elected member nted to a member of a ated to an elected ma | ember | of these statements a | pply to you? Yes • No |
| 9. Materials | | | | |
| Please state what | materials (including | type, colour and name) ar | e to be used externally | y (if applicable): |
| Walls - description | on: | | | |
| | sting materials and fi | | | |
| | o front. No change- t orick to the rear. To b | | | |
| Description of pro | posed materials and | finishes: | | |
| | to remain- no chang on Rear elevation- ex | | y/light aluminium rain: | screen cladding with standing seam roof (colour to match existing brick colour) |
| Roof - description Description of exist | n: sting materials and fi | nishes: | | |
| All existing finishe | | | | |
| | posed materials and | | | |
| Proposed extension | on: standing seam ro | of in dark metal with velu | x windows. | |
| | | | | |

| 9. (Materials continued) | | 9. (Materials continued) | | | | | | |
|--|--|--|---------------|--|--|--|--|--|
| | | | | | | | | |
| Windows - description: Description of existing materials and finishes: | | | | | | | | |
| Existing windows to the rear: metal framed, black painted windows (non sash windows) To remain as is. | | | | | | | | |
| Description of <i>proposed</i> materials and finishes: | | | | | | | | |
| Proposed extension: | | | | | | | | |
| windows- black powder coated metal framed glazing uni | ts. | | | | | | | |
| Doors - description: Description of existing materials and finishes: | | | | | | | | |
| No additional/ or changes to doors. | | | | | | | | |
| Description of <i>proposed</i> materials and finishes: | | | | | | | | |
| No additional/ changes to doors. As existing. | | | | | | | | |
| Boundary treatments - description: Description of <i>existing</i> materials and finishes: | | | | | | | | |
| To the front: metal grille balustrades. Rear: existing chicken wire fencing denoted boundary of | the site | | | | | | | |
| Description of <i>proposed</i> materials and finishes: | | | | | | | | |
| All to remain as existing, with no additions, or changes. | | | | | | | | |
| Vehicle access and hard standing - description: | | | | | | | | |
| Description of <i>existing</i> materials and finishes: | | | | | | | | |
| No vehicular access. Drop off zone and diabled parking sp | paces to the front. | | | | | | | |
| Description of <i>proposed</i> materials and finishes: | | | | | | | | |
| All to remain as existing; no changes. | | | | | | | | |
| Lighting - add description Description of existing materials and finishes: | | | | | | | | |
| Internally- modern spot lighting within common areas an | d strip lighting within clinic areas. | | | | | | | |
| Description of <i>proposed</i> materials and finishes: | | | | | | | | |
| Additional spot lighting to match existing office area ligh | | | | | | | | |
| Are you supplying additional information on submitted p | | s statement? | Yes No | | | | | |
| If Yes, please state references for the plan(s)/drawing(s)/d | | | | | | | | |
| The following plans should read in conjunction with this a LD_0_L00 Proposed Plan | application: | | | | | | | |
| LD_X_L00 Existing Plan | | | | | | | | |
| LD_ELE_L00 Proposed Rear Elevation & Section LD_ELE_XTG Existing Rear Elevation & Section | | | | | | | | |
| SP_00 Site Location Plan | | | | | | | | |
| LD_DA Queens Square Design and Access Statment | | | | | | | | |
| 10. Vehicle Parking | | | | | | | | |
| <u>-</u> | and the same the same the same to the same | | | | | | | |
| Please provide information on the existing and proposed | | Total proposed (including appear | Difference in | | | | | |
| Type of vehicle | Existing number of spaces | Total proposed (including spaces retained) | spaces | | | | | |
| Cars | 0 | 0 | 0 | | | | | |
| Light goods vehicles/public carrier vehicles | 0 | 0 | 0 | | | | | |
| Motorcycles | 0 | 0 | 0 | | | | | |
| Disability spaces | 0 | 0 | 0 | | | | | |
| Cycle spaces | 0 | 0 | 0 | | | | | |
| Other (e.g. Bus) | 0 | 0 | 0 | | | | | |
| Short description of Other | | | | | | | | |
| | | | | | | | | |
| 11. Foul Sewage | | | · | | | | | |
| Please state how foul sewage is to be disposed of: | | | | | | | | |
| Mains sewer Package treatment plant Unknown | | | | | | | | |
| | | | | | | | | |
| Septic tank | Cess pit | | | | | | | |
| Other | | | | | | | | |
| Are you proposing to connect to the existing drainage system? | | | | | | | | |
| Are you proposing to connect to the existing drainage sy | stem? Yes • | No Unknown | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| 12. Assessment of Flood Risk | | | | | | | | | |
|--|---|---|--|---|--|--|--|--|--|
| Is the site within an area at risk of flooding? (Refer to the Environment Agency's Flood Map showing flood zones 2 and 3 and consult Environment Agency standing advice and your local planning authority requirements for information as necessary.) Yes No | | | | | | | | | |
| If Yes, you will need to submit an appropriate flood risk assessment to consider the risk to the proposed site. | | | | | | | | | |
| Is your proposal within 20 metres of a watercourse (e.g. river | stream or beck)? | ○ Yes ● | No No | | | | | | |
| Will the proposal increase the flood risk elsewhere? | | | | | | | | | |
| How will surface water be disposed of? | | | | | | | | | |
| Sustainable drainage system | Main sewer | | Pond/lake | | | | | | |
| Soakaway | Existing water | ercourse | | | | | | | |
| 13. Biodiversity and Geological Conservation | | | | | | | | | |
| To assist in answering the following questions refer to the guidance notes for further information on when there is a reasonable likelihood that any important biodiversity or geological conservation features may be present or nearby and whether they are likely to be affected by your proposals. | | | | | | | | | |
| Having referred to the guidance notes, is there a reasonable on land adjacent to or near the application site: | likelihood of the followir | ng being affected adversely o | r conserved and enhanced wit | hin the application site, OR | | | | | |
| a) Protected and priority species | | | | | | | | | |
| Yes, on the development site Yes, on la | nd adjacent to or near th | e proposed development | No | | | | | | |
| b) Designated sites, important habitats or other biodiversity | features | | | | | | | | |
| Yes, on the development site | nd adjacent to or near th | e proposed development | No |) | | | | | |
| c) Features of geological conservation importance | | | | | | | | | |
| Yes, on the development site Yes, on la | nd adjacent to or near th | e proposed development | No | | | | | | |
| Please describe the current use of the site: The Exisiting Ground floor for which this application applies to is occupied by the National Hospital for Neurology and Neurosurgery. Is the site currently vacant? Yes No Does the proposal involve any of the following? If yes, you will need to submit an appropriate contamination assessment with your application. Land which is known to be contaminated? Yes No A proposed use that would be particularly vulnerable to the presence of contamination? Yes No | | | | | | | | | |
| 15. Trees and Hedges | | | | | | | | | |
| Are there trees or hedges on the proposed development site? Yes No And/or: Are there trees or hedges on land adjacent to the proposed development site that could influence the development or might be important as part of the local landscape character? Yes No If Yes to either or both of the above, you may need to provide a full Tree Survey, at the discretion of your local planning authority. If a Tree Survey is required, this and the accompanying plan should be submitted alongside your application. Your local planning authority should make clear on its website what the survey should contain, in accordance with the current 'BS5837: Trees in relation to design, demolition and construction - Recommendations'. | | | | | | | | | |
| 16. Trade Effluent | | | | | | | | | |
| Does the proposal involve the need to dispose of trade effluents or waste? Yes No | | | | | | | | | |
| 17. Residential Units | | | | | | | | | |
| Does your proposal include the gain or loss of residential uni | ts? | Yes • No | | | | | | | |
| 18. All Types of Development: Non-residential Floorspace | | | | | | | | | |
| Does your proposal involve the loss, gain or change of use of | non-residential floorspa | ce? | • Yes No | | | | | | |
| Use class/type of use | Existing gross internal floorspace (square metres) | Gross internal floorspace to be lost by change of use or demolition (square metres) | Total gross new internal floorspace proposed (including changes of use) (square metres) | Net additional gross internal floorspace following development (square metres) | | | | | |

| 18. All | 18. All Types of Development: Non-residential Floorspace (continued) | | | | | | | | |
|---|--|--|-------|---|-----|----------------------|------|------|--|
| A1 | .1 Shops Net Tradable Area | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| A2 | Financial an | d professional services | 0.0 | | 0.0 | | 0.0 | 0.0 | |
| A3 | Resta | urants and cafes | 0.0 | | 0.0 | | 0.0 | 0.0 | |
| A4 | Drinkir | ng estabishments | 0.0 | | 0.0 | | 0.0 | 0.0 | |
| A 5 | Hot f | ood takeaways | 0.0 | | 0.0 | | 0.0 | 0.0 | |
| B1 (a) | Office (other than A2) | | 0.0 | | 0.0 | | 0.0 | 0.0 | |
| B1 (b) | Research and development | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| B1 (c) | Light industrial | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| B2 | General industrial | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| B8 | Storag | ge or distribution | 0.0 | 0.0 | | | 0.0 | 0.0 | |
| C1 | Hotels an | nd halls of residence | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| C2 | Reside | ential institutions | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| D1 | Non-resi | dential institutions | 270.0 | 0.0 | | 38.0 | | 38.0 | |
| D2 | Assembly and leisure | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| Other | Please Specify | | 0.0 | 0.0 | | 0.0 | | 0.0 | |
| | Total | | 270.0 | 0.0 | | | 38.0 | 38.0 | |
| For hotels, residential institutions and hostels, please additionally indicate the loss or gain of rooms: | | | | | | | | | |
| Use Class Types of use | | Existing rooms to be lost by change of use or demolition | | Total rooms proposed (including changes of use) | | Net additional rooms | | | |

19. Employment

If known, please complete the following information regarding employees:

| | Full-time | Part-time | Equivalent number of full-time |
|--------------------|-----------|-----------|--------------------------------|
| Existing employees | 40 | 0 | 0 |
| Proposed employees | 47 | 0 | 0 |

20. Hours of Opening

If known, please state the hours of opening (e.g. 15:30) for each non-residential use proposed:

| Use | Monday to Friday Start Time End Time | Saturday Start Time End Time | Sunday and Bank Holidays Start Time End Time | Not Known |
|------------|---|---------------------------------|---|------------------|
| A1 | | | | \boxtimes |
| A2 | | | | \boxtimes |
| A3 | | | | × |
| A4 | | | | X |
| A 5 | | | | \boxtimes |
| B1A | | | | \triangleright |
| B1B | | | | \triangleright |
| B1C | | | | \triangleright |
| B2 | | | | \triangleright |
| B8 | | | | \boxtimes |
| C1 | | | | \triangleright |
| C2 | | | | \triangleright |
| D1 | | | | \boxtimes |
| D2 | | | | \boxtimes |
| Other | | | | \boxtimes |

| 24 | • | | ^ | rea |
|----|---|-----|---|-----|
| | • | ΙТΔ | Δ | re2 |
| | | | | |

What is the site area?

00.04 hectares

| 22. Indust | 22. Industrial or Commercial Processes and Machinery | | | | | | | |
|--|---|-----------------------|----------------|-----------------------|----------------------------|----------------------|-----------------------|---|
| type of mach | Please describe the activities and processes which would be carried out on the site and the end products including plant, ventilation or air conditioning. Please include the type of machinery which may be installed on site: | | | | | | | |
| | Not applicable. All is as existing/ no changes. | | | | | | | |
| Is the propos | al for a was | te managem | ent developn | nent? | ○ Yes | No | | |
| 23. Hazaro | dous Sub | stances | | | | | | |
| Is any hazard | lous waste i | nvolved in th | ne proposal? | 0 | Yes No | | | |
| 24. Site Vi | sit | | | | | | | |
| Can the site b | oe seen fror | n a public ro | ad, public foo | tpath, bridleway o | r other public land? | | • Yes | No |
| If the planning | ng authority | needs to ma | ake an appoin | tment to carry out | a site visit, whom shou | ld they contact | ? (Please select on | ly one) |
| ☐ The age | nt | The app | olicant (| Other person | | | | |
| 25. Certifi | cates (Ce | rtificate l | 3) | | | | | |
| | | | | Ce | rtificate of Ownership | - Certificate B | | |
| Logrtify/The | | | - | | - | _ | | ficate under Article 14 on the day 21 days before the date of this |
| application, v | vas the own | er <i>(owner is a</i> | a person with | a freehold interest o | or leasehold interest with | at least 7 years | left to run) and/or a | ngricultural tenant ("agricultural tenant" has the |
| | | | OWITAIIQ COUI | III y Planning Act Ts | 990) of any part of the la | na or building | to which this applic | |
| Owner/Agricu | | | | | | | | Date notice served |
| | University | College Lond | | | T | | | |
| Number: | | | Suffix: | | House name: | | | |
| Street: | Torrington | Place | | | | | | 08/07/2015 |
| Locality: | | | | | | | | |
| Town: | London | | \neg | | | | | |
| Postcode: | WC1 | | | | | | | |
| Name | University | College Lond | don Hospital I | NHS Foundation Tr | rust | | | |
| Number: | 250 | | Suffix: | | House name: | | | |
| Street: | Euston Roa | nd | | | | | | 08/07/2015 |
| Locality: | | | | | | | | |
| Town: London | | | | | | | | |
| Postcode: | NW1 2PG | | | | | | | |
| Title: Mr | | First name: | Robert | | | Surname: | McCabe | |
| Person role: | Agent | | De | claration date: | 08/07/2015 | | \boxtimes | Declaration made |
| 26. Declar | ation | | | | | | | |
| | 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 08/07/2015 | | | | | | | | |
| | | | | .,,,, | | | | NATE 00/0//2013 |
| | | | | | | | | |