

Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680

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

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	lame, Address and Contact Details								
Title:	First name:	Surname:							
Company name	Generator Hostel London Ltd								
Street address:	Generator London, 37		Country Code	National Number	Extension Number				
	Tavistock Place	Telephone number:	Telephone number:						
		Mobile number:							
Town/City	London	Fax number:							
County:	Camden United Kingdom	Email address:							
Postcode:	WC1H 9SE								
2. Agent Nam	e, Address and Contact Details First Name: Philio	Surname: Atk	kins						
		Surfame. Ath	VII 13						
Company name:	Planning Resolution Partnership LLP		Country	National	Extension				
Street address:	City Temple		Code	Number	Number				
	Holborn Viaduct	Telephone number:							
		Mobile number:							
Town/City	London	Fax number:							
County:	London	Tax Hamber.							
Country:		Email address:							
Postcode:	EC1A 2DE								

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3. Site Address	Detail	s											
Full postal address of	of the sit	e (includ	ding full	oostcode w	nere ava	ilable)		Des	cription:				
House:	37			Suffix:									
House name:													
Street address:	Tavisto	ck Place	!										
Town/City:	London							╛					
County:	Camdei	n											
Postcode:	WC1H 9	SE											
Description of location (must be completed				า):									
Easting:		530189)										
Northing:		182456)										
													===
4. Pre-applicati Has assistance or pr			souaht fi	om the loca	ıl authoi	ritv about	this applica	tion?			• Yes No		
•			Ü			-			neln the author	ritv t	to deal with this applica	ation more efficien	+lv)·
	ote the i	Ollowing	giiioiiii	ition about	tric dav	ice you we	ore giveri (ti	iis vviii i	icip tric autrioi	iity	to dear with this applied	morr more emeleri	пул.
Officer name: Title: Ms	Fire	st name	e: Rach	ام					Surname:	En	nglish		
Reference:		ot Hullic	. Itaci						J Surname.				
Date (DD/MM/YYYY)	. I	9/08/20	115	(Mus	t he nre	-annlicatio	on submiss	ion)					
Details of the pre-ap	L				t be pre	-аррпсанс	on submiss	OH					
Invited to submit ap													
5. Description o			,										
o. Description o	ттор	osai											
Please provide a des	-												
Erection of a new from and reconfiguration	ont entra of existi	ince to I ng fron	hostel wi t fire esca	th covered ipe stairs; e	oggia e ection c	ntrance, ac of new doc	coustic glaz or and stair	ed atriu case to p	ım with green provide additic	wall onal	I to enclose a new platfo access to rear external	orm lift for luggage courtyard'.	e & disabled guests
Application reference				2091/P								Date of decision:	06/08/2015
Please state the condition number(s) to which this application relates:													
Condition number(s):												
Has the developmen	nt alreac	ly starto	nd?	Ye	es (•)	No							
Tias the developmen	it all cac	iy starte	.u:		.3	110							
6. Condition(s)	- Remo	oval											
Please state why you	u wish th	ne condi	ition(s) to	be remove	d or cha	anged:							
The applicant wishe amenity concerns ar											of this element of the p	lanning application	n was to remove
If you wish the exist													
It is considered that management, as set							4hr Monda	y to Sur	nday basis due	to th	he characteristics of its	location and throu	gh appropriate
7. Site Visit													
Can the site be seen	from a	oublic re	oad, pub	ic footpath	bridlew	ay or othe	er public lar	nd?		(Yes		
If the planning auth	ority nee	eds to m	nake an a	ppointmen	to carry	y out a site	e visit, whor	n shoul	d they contact	? (P	Please select only one)		
The agent	\bigcirc	The ap	plicant	Otl	ner pers	on							

freehold interes	oplicant certifies that on t st or leasehold interest with	Certificate ntry Planning (Development Manag he day 21 days before the date of this h at least 7 years left to run) of any part olding ("agricultural holding" has the m	application noboo of the land to whice	e) (England dy except m ch the appli	 d) Order 2015 Certifingself/the applicant was cation relates, and the 	as the ow at none o	ner <i>(own</i> f the land	ner is a person with a If to which the application
Title: Mr	First name:	David	Surname:	Williams				
Person role:	Agent	Declaration date:	24/08/2015			Declarat	ion made	9
additional info	oply for planning permiss rmation. I/we confirm tha	ion/consent as described in this form at, to the best of my/our knowledge, a s of the person(s) giving them.		, ,,	•	\boxtimes	Date	24/08/2015

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