

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 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 N    | lame, Address and Contact Details        |                                   |                 |                                     |                     |
|-------------------|--|-----------------------------------|-----------------|-------------------------------------|---------------------|
| Title: Mr         | First name:                              | Surname:                          |                 |                                     |                     |
| Company name      | King's Cross Central General Partner Ltd |                                   |                 |                                     |                     |
| Street address:   | 4 Stable Street                          |                                   | Country<br>Code | National<br>Number                  | Extension<br>Number |
|                   | King's Cross                             | Telephone number:                 | +44             | 020 3664 0200                       |                     |
| _                 |  | Mobile number:                    |                 |                                     |                     |
| Town/City County: | London                                   | Fax number:                       |                 |                                     |                     |
| Country:          | United Kingdom                           | Email address:                    |                 |                                     |                     |
| Postcode:         | N1C 4AB                                  |                                   |                 |                                     |                     |
|                   | e, Address and Contact Details           | es No                             |                 |                                     |                     |
| Title: Ms         | First Name: Alexandra                    | Surname: Wo                       | oolmore         |                                     |                     |
| Company name:     | Argent (King's Cross) Ltd.               |                                   |                 |                                     |                     |
| Street address:   | 4 Stable Street                          | Telephone number:  Mobile number: | Country<br>Code | National<br>Number<br>0203 664 0298 | Extension<br>Number |
| Town/City         | London                                   |                                   |                 |                                     |                     |
| County:           |  | Fax number:                       |                 |                                     |                     |
| Country:          | United Kingdom                           | Email address:                    |                 |                                     |                     |
| Postcode:         | N1C 4AB                                  | alexandra.woolmore@               | argentllp.co.ul | <u> </u>                            |                     |

004612399

| 3. Site Address  | s Det  | tails  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
|--|--|--|---|--|---|--|--|--|---|--|---|---|--|---|--|--|---|-----------|
| Full postal address  | of the   | e site (including  | full postco   | de wher  | re avai   | lable)   |  |  | De  | escription   | on:   |   |  |   |  |  |   | _         |
| House:   |  |  | S   | uffix:   |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| House name:  | Gas  | Holder Triplet   |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Street address:  | Dev  | elopment Zone  | e N   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
|  | King   | g's Cross Centra   | I, York Way   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Town/City:   | Lon  | don  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| County:  |  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Postcode:  | N1C  | ·  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Description of loca<br>(must be complete   |  | 0  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Easting:   |  | 529990   |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Northing:  |  | 183646   |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
|  | •  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| 4. Pre-applicat  |  |  |   |  |   |  |  |  |   |  |   |   | O 11   |   |  |  |   |           |
| Has assistance or p  | rior a   | dvice been sou   | ght from th   | e local a  | uthori  | ty abou  | ut this a  | appli  | cation?   |  |   |   | Yes  | 0   | No   |  |   |           |
| If Yes, please comp  | lete tl  | he following in  | formation a   | bout the   | e advid   | e you  | were gi  | iven   | (this will  | help th  | he author   | ity   | to deal with th  | nis app   | lication more  | efficien   | ıtly):  |           |
| Officer name:  |  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Title: Ms  |  | First name:  | Jenna   |  |   |  |  |  |   | Sur  | rname:  | Lit   | therland   |   |  |  |   |           |
| Reference:   |  | 2004/2307/P  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Date (DD/MM/YYY)   | <b>Y</b> ):  |  |   | (Must b  | e pre-  | applica  | ition su   | ubmis  | ssion)  |  |   |   |  |   |  |  |   |           |
| Details of the pre-a   | pplica   | ation advice red   | eived:  |  |   |  |  |  |   |  |   |   |  |   |  |  |   | _         |
| Presentation of mir  | nor an   | nendments.   |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Please provide a de Outline application Development Speciserviced apartmen health, education, of gas holder guide alongside the re-er and structures, to ficrossings and othe Application referen Please state the condition number 9, 16, 24, 27, 39, 42. Has the development | n for a cificati ts and culture fram ected acilitar work ice nu nditio (s):  a, 46 ent alr | comprehensive co | e, phased, r<br>pment com<br>ng, food an<br>d leisure fa<br>ew resident<br>ose new pla<br>shment for<br>gent's Cana<br>004/2307/F<br>which this | nixed-us<br>prises b<br>d drink a<br>cilities, v<br>ial and c<br>y faciliti<br>specified<br>l; the re- | se deve<br>usines<br>and fin<br>vithin to<br>other c<br>es and<br>d uses;<br>-profili | elopme<br>s and e<br>nancial<br>the D1<br>develop<br>open s<br>new si<br>ng of s | ent of for<br>employing<br>and programd D2<br>proment,<br>space; r<br>treets a<br>ite leve | orme<br>ymen<br>ofess<br>2 use<br>, on the<br>relocand o | er railway<br>t uses wi<br>sional ser<br>classes;<br>he site of<br>ation of<br>ther meand other | y lands<br>ithin th<br>rvices v<br>night c<br>f the W<br>an exis<br>ans of a<br>suppor | ne B1 use of within the clubs; mul /estern Gotting distriaccess and rting infra | clas<br>A1<br>Iti st<br>Dod<br>ict (<br>d ci<br>astro | ss; residential u<br>l, A2, A3, A4 ar<br>storey and othe<br>ls Shed; re-ere<br>gas governor;<br>irculation; land | uses (ind A5 user car per car | ncluding stud<br>use classes; th<br>parking; re-er<br>of the guide fi<br>of alteration<br>ng including | lent acco<br>ne full rar<br>ection of<br>rame for<br>to other<br>open spa<br>cision: | ommodation),<br>nge of community,<br>f the linked triplet<br>gas holder no 8,<br>existing buildings |           |
|  |  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   | $\preceq$ |
| 6. Discharge of  | f Cor  | ndition(s)   |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |
| Please provide a fu  |  | <u> </u>   |   |  |   |  |  |  |   |  | •   |   |  |   |  |  |   | _         |
| <ul> <li>Drawing Package</li> <li>Submission State</li> </ul>  |  |  |   |  |   |  |  |  |   |  | ipproval  |   |  |   |  |  |   | ╛,        |
| 7. Part Dischar  | ge o   | f Condition  | (s)   |  |   |  |  |  |   |  |   |   |  |   |  |  |   | $\preceq$ |
| Are you seeking to   | disch  | arge only part (   | of a condition  | on?  |   | •  | Yes  |  | ) No  |  |   |   |  |   |  |  |   |           |
| If Yes, please indica  |  |  |   |  | licatio   |  |  |  | ,   |  |   |   |  |   |  |  |   |           |
| This application see<br>Approval 2014/638  | eks to   | •  |   |  |   |  |  | s the  | y relate t  | o the G  | Gas Holde   | r Tr  | riplets, specific  | cally m   | inor amendm  | nents to   | Reserved Matters  |           |
|  |  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   | <u>ا</u>  |
|  |  |  |   |  |   |  |  |  |   |  |   |   |  |   |  |  |   |           |

| Can the site be seen fro  | m a public road, publi  | c footpath, bridleway or other public land?                                      | <ul><li>Yes</li></ul>  | ○ No          |      |            |
|---------------------------|-------------------------|--|------------------------|---------------|------|------------|
| If the planning authority | y needs to make an ap   | pointment to carry out a site visit, whom should the                             | ey contact? (Please se | ect only one) |      |            |
| • The agent               | The applicant           | Other person   |                        |               |      |            |
| 9. Declaration            | anning permission/co    | nsent as described in this form and the accompany                                | ing plans/drawings an  | d             |      |            |
| additional information.   | /we confirm that, to tl | ne best of my/our knowledge, any facts stated are to<br>e person(s) giving them. |                        |               | Date | 05/11/2015 |