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**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 Name, Address and Contact Details							
Title: Mr	First name:	Surname:					
Company name	University College London Hospitals NHS Foundation Trust						
Street address:	C/O Agent		Country Code	National Number	Extension Number		
		Telephone number:					
		Mobile number:					
Town/City		Fax number:					
County:		1					
Country:	United Kingdom	Email address:					
Postcode:							
Are you an agent acting on behalf of the applicant?    Yes No							
2. Agent Name, Address and Contact Details							
Title: Miss	First Name: Emily	Surname: Cod	chrane				
Company name:	JLL						
Street address:	30 Warwick St		Country Code	National Number	Extension Number		
		Telephone number:	44	20 3147	1632		
		Mobile number:					
Town/City	London	Fax number:					
County:	London	Tax namber.					
Country:	United Kingdom	Email address:					
Postcode:	W1B5NH	emily.cochrane@eu.jll.c	com				

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3. Site Address Details							
Full postal address	of the site (including full postcode where available)	Description:					
House:	Suffix:						
House name:	Former Royal Ear Hospital						
Street address:	Capper Street						
Town/City:	London						
County:	Camden						
Postcode:	WC1E 6AP						
Description of location or a grid reference (must be completed if postcode is not known):							
Easting:	529518						
Northing:	182064						
4. Pre-applicat	on Advice						
Has assistance or prior advice been sought from the local authority about this application?  Yes  No							
. Description of	f Proposal						
	scription of the approved development as shown on the decision let		ol (Class D1) fallousing domalities of the				
Erection of a 6 storey building and excavation works to create a 3 storey basement, comprising a head and neck outpatient hospital (Class D1) following demolition of the former UCL Student Union and Royal Ear Hospital building							
Application reference number: 2015/1281/P Date of decision: 20/01/2016							
Please state the cor	dition number(s) to which this application relates:						
Condition number(s):							
17							
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:  Please refer to covering letter.							
7. Part Dischar	ge 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							
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9. Declaration							
I/we hereby apply fo	or planning permission/consent as described in this form and the acc	ompanying 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 t	he genuine opinions of the person(s) giving them.		Date 26/01/2016				