

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 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 Na	ame, Address a	nd Contact Details					
Title:	First Name:			Surname:	not applicable		
Company name:	Willmott Dixon						
Street address:	c/o agent						
			Telephone numb	er:			
			Mobile number:				
Town/City:			Fax number:				
Country:			Email address:				
Postcode:							
Are you an agent acting on behalf of the applicant? Yes No							
2. Agent Name	, Address and C	Contact Details					
Tide: Ma	First Names	David		0	WILLIAM TO THE TOTAL THE TOTAL TO THE TOTAL TOTAL TO THE		
Title: Mr	First Name:	David	1	Surname:	Whittington		
Company name:	Savills						
Street address:	33 Margaret Street						
			Telephone numb	oer: 0207	5579997		
			Mobile number:				
Town/City:	London		Fax number:				
Country:			Email address:				
Postcode:	W1G 0JD		dwhittington@sa	dwhittington@savills.com			

3. Site Addres	ss Details					
Full postal addre	ss of the site (including full po	stcode where available	e) Description:			
House:	Suffix:					
House name:	Royal Free Hospital					
Street address:	Pond Street					
Town/City:	LONDON					
Postcode:	NW3 2QG					
	cation or a grid reference sted if postcode is not known):					
Easting:	527297					
Northing:	185410					
4. Pre-applica	tion Advice					
Has assistance of	r prior advice been sought fro	m the local authority al	bout this application?	☐ Yes 💿 I	No	
5. Description	of the Proposal					
Please provide a	description of the approved d	evelopment as shown	on the decision letter:			
Proposal:						
located on Heat	isting carpark and ancillary str n Strange Garden site facing v	vest to Hampstead Gre	een footpath and			
Transplantation,	ntaining laboratory/research sp a patient hotel, Royal Free Cl	narity offices plus a rep	placement car park of			
58 spaces, repla Hospital.	cement memorial garden, pla	nt and landscaping, all	ancillary to Royal Free			
Application refere	rence number: LPA Ref (2014/6845/P) Date of decision: 25/04/2016					
	condition number(s) to which	his application relates:	:	1		
Application for the	r(s): ne approval of details required	under condition 5 of p	lanning permission dated 25	April 2016		
Has the develop	ment already started?	′es No				
чотогорг						
C Dicalance						
יס. טוscnarge ו	of Condition(s)					
Please provide a	full description and/or list of the	ne materials/details tha	at are being submitted for app	oroval:		
See attached dr	awings / documents					
7. Part Discha	rge of Condition(s)					
Are you seeking	to discharge only part of a cor	dition?		Yes <a> No		
8. Site Visit						
Can the site be s	een from a public road, public	footpath, bridleway or	other public land?	Yes No		

8. Site Visit									
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									
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.	~	Date	17/05/2016						