

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 Name, Address and Contact Details									
Title:	First Name:			Surname:	n/a				
Company name:	Willmott Dixon								
Street address:	c/o Agent								
			Telephone number:						
			Mobile number:						
Town/City:			Fax number:						
Country:			Email address:						
Postcode:									
Are you an agent	acting on behalf of the	ne applicant?	Yes	lo					
2. Agent Name, Address and Contact Details									
Title: Mr	First Name:	David		Cuma ama a	White and an				
		David		Surname:	Whittington				
Company name:	Savills								
Street address:	33 Margaret Street								
			Telephone numb	oer: 0207	5579997				
			Mobile number:						
Town/City:	London		Fax number:						
Country:									
Country.			Email address:						

3. Site Addres	ss Details								
Full postal addre	ss of the site (including full postcode where availab	le) Description:							
House:	Suffix:								
House name:	Royal Free Hospital								
Street address:	Pond Street]							
]							
Town/City:	LONDON	<u> </u>							
Postcode:	NW3 2QG								
	cation or a grid reference eted if postcode is not known):								
Easting:	527297	7							
Northing:	185410]							
4. Pre-applica	tion Advice								
Has assistance of	or prior advice been sought from the local authority	about this application?	◯ Yes ⊚ 1	No					
5. Description	of the Proposal								
Please provide a	description of the approved development as shown	n on the decision letter:							
Proposal:									
Demolition of existing carpark and ancillary structures and erection of new 7 storey building, located on Heath Strange Garden site facing west to Hampstead Green footpath and									
Transplantation,	ntaining laboratory/research space for Institute for In a patient hotel, Royal Free Charity offices plus a re	eplacement carpark of							
58 spaces, repla Hospital	acement memorial garden, plant and landscaping, a	all ancillary to Royal Free							
Application refere	ence number: 2014/6845/P		Date of decision:	25/04/2016					
	condition number(s) to which this application relate	s:	1						
Application for the	er(s): ne approval of details required under condition 19 o	of planning permission dated 25	5 April 2016						
Has the develop	ment already started? Ves No								
чотогорг									
C Dicalance	of Condition(a)								
ס. טוscnarge (of Condition(s)								
Please provide a	full description and/or list of the materials/details the	nat are being submitted for app	roval:						
see attached do	cuments								
7. Part Discha	arge of Condition(s)								
Are you seeking	to discharge only part of a condition?		Yes <a> No						
8. Site Visit									
Can the site be s	een from a public road, public footpath, bridleway o	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							