

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 a non-material amendment following a grant of planning permission. Town and Country Planning 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 and Contact Details					
Title: Herbal House Investmer Ltd	First Name:	Surname: c/o Montagu Evans				
Company name:						
Street address:	c/o Montagu Evans					
		Telephone number:				
		Mobile number:				
Town/City:		Fax number:				
Country:		Email address:				
Postcode:						
Are you an agent acting on behalf of the applicant?						
2. Agent Name	, Address and Contact Details					
Title: Mr	First Name: Patrick	Surname: Reedman				
Company name:	Montagu Evans					
Street address:	Montagu Evans LLP					
	5 Bolton Street	Telephone number: 02073127523				
		Mobile number:				
Town/City:		Fax number:				
Country:		Email address:				
Postcode:	W1J8BA	patrick.reedman@montagu-evans.co.uk				

3. Site Addres	ss Details									
Full postal addre	ess of the site (in	cluding full p	ostcode wh	ere available	•)	Description:				
House:	10	Suffix	:							
House name:	Herbal House									
Street address:	:: Back Hill									
Town/City:	LONDON									
Postcode:	EC1R 5EN									
Description of lo):							
Easting:	531245									
Northing:	182074									
4. Eligibility										
Do you, or the powhich this amend If you are not the Management Pro	dment relates? e sole owner, ha	s notification	under artic	e 10 of the T					YesYes	No No Not Applicable
Person notified		Address								Date of notification (DD/MM/YYYY)
UK Power Networks		Number:	237	Suffix:		House name:				13/06/2016
		Street:	Southwark	Bridge Road	 d					
		Town:	London							
		Postcode:								
		1 0010000.	02.0.0							
5. Description	n of Your Pro	pposal								
Description of Ap										
from higher edu units at lower g ground floor; lig contained duple	ucation college (round, ground a phtwell infill exte	D1) to a mixed and upper grown at second associate	ed use compund floors and third and external a	prising offices and a flexible d fourth floor	s (B1) fi comme levels;	rom lower-gro ercial gallery/o two-storey ro	ound to four office (A1/B of extensio	th floors, thre 1) with ancill n to create ac	ee flexible retail/ ary café at lowe dditional office (E	for change of use café/office (A1/A3/B1) r-ground floor and part B1) space and six self- the building line and the
Reference numb	per: 2015/6052/P									
*Date of decision (DD/MM/YYYY):	· 121/12/2016									
What was the or Full planning pe		n type?								
For the purpose		es, which of	the following	a best describ	bes the	original appli	cation type	?		
	der developme			_						
Other: any	thing not covere	d by the abo	ve category	,						

6. Non-Material Amendment(s)	Sought	_						
*Please describe the non-material ame	endment(s) you are seeking to make:							
Incorporation of double doors to the Minor internal changes to the configuration.	reception entrances and creating a small recess to the entrance of Reception 2; uration of stairs; and 6th floor extension, being solid insulated panels with brick slip cladding with crittal windows in lieu of curtain s;							
Are you intending to substitute amende	ed plans or drawings?							
Old plan/drawing numbers:	See enclosed document							
New plan/drawing numbers:	See enclosed document							
Please state why you wish to make thi	s amendment:	=						
Improvements to building layout, func	ion & envelope.							
		_						
7. Pre-application Advice		_						
Has assistance or prior advice been so	ought from the local authority about this application?							
		_						
8. Site Visit								
•	d, public footpath, bridleway or other public land? e an appointment to carry out a site visit, whom should they contact? (Please select only one) Other person							
		_						
9. Authority Employee/Membe	f .							
With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of sta (d) related to an elected mem								
		_						
10. Declaration								
drawings and additional information. I/	ion/consent as described in this form and the accompanying plans/ we confirm that, to the best of my/our knowledge, any facts stated are en are the genuine opinions of the person(s) giving them. Date 13/06/2016							