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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. Applicar                         | t Name, Address and Con            | act Details        |                                     |         |  |
|-------------------------------------|------------------------------------|--------------------|-------------------------------------|---------|--|
| Title: Herballer House Investigated | I                                  |                    | Surname: N                          | N/A     |  |
| Company nai                         | ne:                                |                    |                                     |         |  |
| Street addres                       | c/o agent                          |                    |                                     |         |  |
| 1                                   |                                    | Telephone numb     | oer:                                |         |  |
| l                                   |                                    | Mobile number:     |                                     |         |  |
| Town/City:                          |                                    | Fax number:        |                                     |         |  |
| Country:                            |                                    | Email address:     |                                     |         |  |
| Postcode:                           |                                    |                    |                                     |         |  |
| Are you an a                        | ent acting on behalf of the applic | nnt?   ⊚ Yes   ○ N | lo                                  |         |  |
|                                     |                                    |                    |                                     |         |  |
| 2. Agent Na                         | me, Address and Contact            | Details            |                                     |         |  |
| Title: Mr                           | First Name: Patrick                |                    | Surname: F                          | Reedman |  |
| Company nai                         | ne: Montagu Evans                  |                    |                                     |         |  |
| Street addres                       | s: Montagu Evans LLP               |                    |                                     |         |  |
|                                     | 5 Bolton Street                    | Telephone numb     | oer: 020731                         | 27523   |  |
|                                     |                                    | Mobile number:     |                                     |         |  |
| Town/City:                          |                                    | Fax number:        |                                     |         |  |
| Country:                            |                                    | Email address:     |                                     |         |  |
| Postcode:                           | W1J8BA                             | patrick.reedmar    | patrick.reedman@montagu-evans.co.uk |         |  |

| 3. Site Addres                    | ss Details  |                                |                             |                              |         |
|-----------------------------------|---|--------------------------------|-----------------------------|------------------------------|---------|
| Full postal addre                 | ess of the site (including full postcode where available  | e) Description:                |                             |                              |         |
| House:                            | 10 Suffix:  |                                |                             |                              |         |
| House name:                       | Herbal House  |                                |                             |                              |         |
| Street address:                   | Back Hill   |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |
| Town/City:                        | LONDON  |                                |                             |                              |         |
| Postcode:                         | EC1R 5EN  |                                |                             |                              |         |
|                                   | ocation or a grid reference<br>eted if postcode is not known):  |                                |                             |                              |         |
| Easting:                          | 531245  |                                |                             |                              |         |
| Northing:                         | 182074  |                                |                             |                              |         |
| 1                                 |   |                                |                             |                              |         |
| 4. Pre-applica                    | ation Advice  |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |
| Has assistance                    | or prior advice been sought from the local authority at   | bout this application?         |                             | No                           |         |
|                                   |   |                                |                             |                              |         |
| 5. Description                    | n of the Proposal   |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |
|                                   | description of the approved development as shown from higher education college (D1) to a mixed use college.         |                                | ver-around to fourth floors | s three flexible retail/café | /office |
| (A1/A3/B1) unit                   | s at lower ground, ground and upper ground floors ar  | nd a flexible commercial galle | ery/office (A1/B1) with and | cillary café at lower-groun  | d floor |
|                                   | d floor; lightwell infill extension at second third and for<br>ed duplex apartments; and associated external altera |                                |                             | ditional office (BT) space   | anu     |
| Application refer                 | ence number: 2014/3683 as varied by 201   | 5/6052                         | Date of decision:           | 31/03/2015                   |         |
| Please state the Condition number | condition number(s) to which this application relates:  | :                              | •                           |                              |         |
| Condition 2 (a)                   |   |                                |                             |                              |         |
| Has the develop                   | ment already started?   Yes   No If Yes   | s, please state when the dev   | elonment was started:       | 28/09/2015                   |         |
| -                                 |   | s, piedse state when the devi  | siopment was started.       | 20/03/2013                   |         |
| Has the develop                   | ment been completed? Q Yes   No   |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |
| 6. Discharge                      | of Condition(s)   |                                |                             |                              |         |
| Please provide a                  | a full description and/or list of the materials/details tha   | it are being submitted for ann | iroval:                     |                              |         |
|                                   | Window details of all crittal windows, as shown in this   |                                |                             | shown in the accompany       | ing     |
| pack, sample to                   | b be provided.<br>Metal Spandrel Panels and brickwork repair - Image:   | s shown in the application pa  | ck, sample to be provided   | 1.                           |         |
| (4)                               |   |                                |                             |                              |         |
| 7 Port Disable                    | argo of Condition(a)  |                                |                             |                              |         |
| 7. Part Discha                    | arge of Condition(s)  |                                |                             |                              |         |
| Are you seeking                   | to discharge only part of a condition?  |                                | Yes     No                  |                              |         |
|                                   | dicate which part of the condition your application rela  | ates to:                       |                             |                              |         |
| For approval -                    |   |                                |                             |                              |         |
|                                   | Window details of all crittal windows, as shown in this   | s submission                   |                             |                              |         |
| Condition 2(b) -                  | Metal Spandrel Panels and brickwork repair  |                                |                             |                              |         |
|                                   |   |                                |                             |                              |         |

| B. Site Visit  |   |
|--|---|
| Can the site be seen from a public road, public footpath, bridleway or other public land?  |   |
| - The agent - The approximation of the agent - The age | - |
| 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  |   |
|  |   |