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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 Name, Address and Contact Details**

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Paul"/>	Surname:	<input type="text" value="Mills"/>
Company name:	<input type="text" value="Great Ormond Street Hospital Children's Charity"/>				
Street address:	<input type="text" value="40 Bernard Street"/>				
	<input type="text"/>				
	<input type="text"/>				
Telephone number:	<input type="text"/>				
Mobile number:	<input type="text"/>				
Town/City:	<input type="text" value="London"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text" value="WC1N 1LE"/>	<input type="text"/>			
Are you an agent acting on behalf of the applicant?					
<input checked="" type="radio"/> Yes <input type="radio"/> No					

**2. Agent Name, Address and Contact Details**

Title:	<input type="text" value="Mr"/>	First Name:	<input type="text" value="Duncan"/>	Surname:	<input type="text" value="Finch"/>
Company name:	<input type="text" value="Avanti Architects Limited"/>				
Street address:	<input type="text" value="361-373 City Road"/>				
	<input type="text"/>				
Telephone number:	<input type="text" value="02072783060"/>				
Mobile number:	<input type="text" value="07740950165"/>				
Town/City:	<input type="text" value="London"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text" value="EC1V1AS"/>	<input type="text" value="df@avantiarchitects.co.uk"/>			

3. Site Address Details

Full postal address of the site (including full postcode where available)

House:8Suffix:

House name:

Street address:Sandwich Street

Town/City:LONDON

Postcode:WC1H 9PL

Description of location or a grid reference (must be completed if postcode is not known):

Easting:530129

Northing:182561

Description:

4. Eligibility

Do you, or the person on whose behalf you are making this application, have an interest in the part of the land to which this amendment relates?

Yes

No

If you are not the sole owner, has notification under article 10 of the Town and Country Planning (Development Management Procedure) (England) Order 2015 been given?

Yes

No

Not Applicable

Person notified	Address	Date of notification (DD/MM/YYYY)
	<div><div>Number:</div><div>Suffix:</div><div>House name:</div><div>Street:</div><div>Town:</div><div>Postcode:</div></div>	

5. Description of Your Proposal

Description of Approved Development:

Change of use from House in Multiple Occupation (Sui Generis) to a Hostel (Sui Generis) to be used as accommodation for parents of children being treated at Great Ormond Street Hospital (GOSH) and staff accommodation for GOSH medical staff as needed.

Reference number:

2015/6620/P

\*Date of decision (DD/MM/YYYY):

18/04/2016

What was the original application type?

Full planning permission

For the purpose of calculating fees, which of the following best describes the original application type?

Householder development:

Development to an existing dwelling-house or development within its curtilage

Other:

anything not covered by the above category

6. Non-Material Amendment(s) Sought

\*Please describe the non-material amendment(s) you are seeking to make:

Planning Portal Reference : PP-05728914

## 6. Non-Material Amendment(s) Sought

Changes to internal layout as follows:

- Communal accommodation relocated to lower ground floor
  - Staircase to lower ground floor in No. 7 reinstated
  - Provision of additional new shower rooms
- Revised design for proposed ensuite shower rooms

Are you intending to substitute amended plans or drawings?

☒ Yes ☐ No

Old plan/drawing numbers:

PS-E-01A PS-D-01C PS-P-01D

New plan/drawing numbers:

16032-AA-G70-01-Rev A 16032-AA-G20-01-Rev F 16032-AA-G20-02-Rev F 16032-AA-G20-E01 16032-AA-EX-P01 16032-AA-EX-P02 16032-AA-EX-E01 16032-AA-VIS-01 16032-AA-VIS-02 16032-AA-07-G4-RPT002-Sanitary Fixtures-Rev C

Please state why you wish to make this amendment:

We wish to make this amendment to ensure that:

- equal access is provided from all bedrooms to the full range of communal facilities
- all bedrooms have direct access to ensuite sanitary facilities
- the construction and layout of the proposed shower rooms is rationalised, to enhance functionality and eliminate issues re cleaning and maintenance

## 7. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title:

Mr

First name:

Charles

Surname:

Thuaire

Reference:

2016/5894/PRE

Date (DD/MM/YYYY):

27/10/2016

(Must be pre-application submission)

Details of the pre-application advice received:

Site visit with Conservation Officer (Charles Rose) - Thursday 11th August 2016.  
Meeting held Thursday 10th November 2016 to discuss proposals.  
Revised plans issued for comment Friday 2nd December 2016.  
Comment received re revised plans Wednesday 7th December 2016.

## 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 ☐ The applicant ☐ Other person

## 9. Authority Employee/Member

With respect to the Authority, I am:

- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☒ No

## 10. 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

04/01/2017