

Email: [planning@camden.gov.uk](mailto: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 Name, Address and Contact Details**

Title:	<input type="text" value="Ms"/>	First Name:	<input type="text" value="Julia"/>	Surname:	<input type="text" value="Farr"/>
Company name:	<input type="text" value="London Borough of Camden"/>				
Street address:	<input type="text" value="1st Floor"/>				
	<input type="text" value="33-35 Jamestown Road"/>				
	<input type="text"/>				
Town/City:	<input type="text" value="London"/>	Telephone number:	<input type="text"/>		
Country:	<input type="text"/>	Mobile number:	<input type="text"/>		
Postcode:	<input type="text" value="NW1 7DB"/>	Fax number:	<input type="text"/>		
		Email address:	<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="Philip"/>	Surname:	<input type="text" value="Harvey"/>
Company name:	<input type="text" value="PCKO Architects"/>				
Street address:	<input type="text" value="5-8 Hardwick Street"/>				
	<input type="text"/>				
	<input type="text"/>				
Town/City:	<input type="text" value="London"/>	Telephone number:	<input type="text" value="02073728918"/>		
Country:	<input type="text" value="United Kingdom"/>	Mobile number:	<input type="text"/>		
Postcode:	<input type="text" value="EC1R 4RG"/>	Fax number:	<input type="text"/>		
		Email address:	<input type="text" value="ph@pcko.co.uk"/>		

### 3. Site Address Details

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

Description:

House:  Suffix:

House name:

Street address:

Town/City:

Postcode:

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

Easting:

Northing:

### 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)
<input type="text"/>	Number: <input type="text"/> Suffix: <input type="text"/> House name: <input type="text"/> Street: <input type="text"/> <input type="text"/> <input type="text"/> Town: <input type="text"/> Postcode: <input type="text"/>	<input type="text"/>

### 5. Description of Your Proposal

Description of Approved Development:

Demolition of existing buildings and redevelopment to provide: a new 3,228sqm (GIA) Centre for Independent Living (CIL) (Class D1) comprising 3 storeys plus basement at Greenwood Place; a part 5 part 7 storey mixed-use development at Highgate Road comprising 42 residential units (including 8 supported affordable housing units) and 100sq m (GIA) social enterprise in flexible retail, restaurant/café, office or community use (Classes A1/A3/B1/D1) at ground floor level; highways improvements to Greenwood Place, and associated plant, landscaping, servicing and disabled car parking.

Reference number:

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

What was the original application type?

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:

Reduction in the size of the basement with the removal of the Hydrotherapy Pool; removal of 1 no. lift; minor internal alterations as indicated on the drawings; minor external alterations indicated on the drawings to suit design development.

Are you intending to substitute amended plans or drawings?  Yes  No

Old plan/drawing numbers:

1213\_PL\_160\_Rev\_D 1213\_PL\_161\_Rev\_B 1213\_PL\_162\_Rev\_A 1213\_PL\_163\_Rev\_A 1213\_PL\_164\_Rev\_A  
1213\_PL\_261\_Rev\_A 1213\_PL\_265\_Rev\_A

New plan/drawing numbers:

1213\_PL\_160\_Rev\_E 1213\_PL\_161\_Rev\_C 1213\_PL\_162\_Rev\_B 1213\_PL\_163\_Rev\_B 1213\_PL\_164\_Rev\_B  
1213\_PL\_261\_Rev\_B 1213\_PL\_265\_Rev\_B

Please state why you wish to make this amendment:

Please refer to PCKO covering letter enclosed.

## 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:  First name:  Surname:

Reference:

Date (DD/MM/YYYY):  (Must be pre-application submission)

Details of the pre-application advice received:

Issuing of proposed sketches to Mr. McClue and advice on the appropriate form of planning application to suit proposed changes.

## 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

If Other has been selected, please provide:

Title:  First name:  Surname:

Telephone number:

Email Address:

## 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

If Yes, please provide details of the name, relationship and role:

The applicant, Ms. Julia Farr is an employee of the London Borough of Camden

## 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