

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 removal or variation of a condition following grant of planning permission. 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 N	ame, Address and Contact [	Details
Title: Ms	First Name: Julia	Surname: Farr
Company name:	London Borough of Camden	
Street address:	1st Floor	
	33-35 Jamestown Road	Telephone number:
		Mobile number:
Town/City:	London	Fax number:
Country:		Email address:
Postcode:	NW1 7DB	
Are you an agent	acting on behalf of the applicant?	Yes O No
2. Agent Name	e, Address and Contact Deta	ils
Title: Mr	First Name: Philip	Surname: Harvey
Company name:	PCKO Architects	
Street address:	5-8 Hardwick Street	
		Telephone number: 02073728918
		Mobile number:
Town/City:	London	Fax number:
Country:	United Kingdom	Email address:
Postcode:	EC1R 4RG	ph@pcko.co.uk

3. Site Addres	ss Det	tails																
Full postal addre	ss of th	ne site (ir	cluding f	ull postc	ode wl	here av	ailable)	)	Descri	otion:								
House:	25		S	Suffix:														
House name:	Green	nwood Ce	entre															
Street address:	Green	nwood Pl	ace															
Town/City:	LOND	OON																
Postcode:	NW5	 1LB																
Description of lo (must be comple																		
Easting:	52881	3																
Northing:	18538	<del></del> 35																
4. Pre-applica	ation A	Advice																
Has assistance of	or prior	advice b	een sou	ght from	the loc	cal autho	ority ab	out th	is applic	ation?			Yes	No	)			
If Yes, please co	mplete	the follo	wing info	rmation	about t	the adv	ice you	ı were	given (t	his will he	elp th	ne authorit	y to deal wi	ith this	application	on more	efficien	ntly):
Officer name:																		
Title: Mr		First nan	ne:	Jonath	 an						Su	urname:	McClue					
Reference:												]						
Date (DD/MM/Y)	YYY):	05/01/2	017	(Must	be pre	e-applica	ation s	ubmiss	sion)			1						
Details of the pre	•	ation ad	vice rece			• •			,									
Advice consiste	d of a p	re-applic	cation me	eting on	the 5t	th of Jar	nuary 2	2017 fc	llowed	by email a	and t	telephone	discussions	s there	after.			
5. Description	n of th	e Prop	osal															
Please provide a												l	ant Living /	CII \ (C	Jaca D4)		in a 2	
Demolition of ex storeys plus ba	sement	t at Gree	nwood P	lace; a p	art 5 p	oart 7 sto	orey m	ixed-u	se deve	lopment a	at Hi	ghgate Ro	ad compris	sing 42	residenti	ial units	(includi	
supported affor at ground floor																	1/A3/B1	1/U1)
Application refer	0000 01	ımbor:		2013/59	===== 947/P a	amende	d by: 2	2015/3	151/P (a	approved)	)	Dot	e of decisio	n. [	18/06/20	21.4		
Application refer				2016/09					3/P (pe	nding)		Date	e or decision	''. [	10/00/20			
Please state the Condition number		on numb	er(s) to v	vhich this	s appli	cation re	elates:											
Condition 2 (app	oroved	plans)																
Has the develop	ment al	ready sta	arted?	Yes	s Q	No	If Yes	s, plea	se state	when the	e dev	/elopment	was started	d:	25/05/20	 016		
Has the develop	ment he	een com	nlatad?	O Yes		No												
rias trie developi	ineni be	sen com	pieteu:	<u> </u>	, •	NO												
		-														-		
6. Condition(	s) - Re	emoval																
Please state why	/ VOLUM	ish the c	ondition/	s) to he	remov"	ed or ch	anaed	ļ•										
Amendments to	-								ngs and	suppleme	ental	planning,	design and	l acces	s statem	ent		
If you wish the ex	xisting (	condition	to be ch	anged, į	olease	state h	ow you	ı wish	the con	dition to b	e va	ried:						

6. Condition(s) -	Removal								
Variation of Condition	on 2 (approv	ed plans)							
7. Site Visit									
Can the site be seen	n from a publ	ic 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 se	elected, pleas	se provide:							
Title: Mr	First name:	Matt		Surname:	Davis				
Telephone number:	079706549	983		•					
Email Address:	Matthew.D	avis@kier.co.uk							
8. Certificates (C	ertificate	A)							
freehold interest or lea	certifies that or sehold interes an agricultura First name:	n the day 21 days before the twith at least 7 years left to holding ("agricultural holding")		(England) Orde except myself/the ch the application rence to the defit Surname:	applicant was the n relates, and that				
r cream rele:			Designation date:	20/0	7172011				
drawings and addition	onal informat	ion. I/we confirm that, to	escribed in this form and the acc o the best of my/our knowledge, ne opinions of the person(s) givi	any facts stat	ans/ ed are	Date 26/01/2017			