

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 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. Applicant Name, Address and Contact Details						
Title: Mr	First Name:	Vincent		Surname:	Grebelius	
Company name:	27-29 Whitfield Pro	perty Limited				
Street address: Cyclone House						
	27-29 Whitfield Stre	eet	Telephone numb	er:		
			Mobile number:			
Town/City:	LONDON		Fax number:			
Country:			Email address:			
Postcode:	W1T 2SE					
Are you an agent acting on behalf of the applicant?		🖲 Yes 🔾 N	lo			

2. Agent Name, Address and Contact Details							
Title:	Virs	First Name:	Meera		Surname	Nash	
Company	y name:	Stagg Architects Li	mited				
Street ad	ldress:	First Floor					
		30-32 Tabard Stree	et	Telephone numb	oer: 075	05232806	
				Mobile number:			
Town/City	y:	London		Fax number:			
Country:		United Kingdom		Email address:			
Postcode	e:	SE1 4JU		meera.nash@staggarchitects.co.uk			

3. Site Address Details
Full postal address of the site (including full postcode where ava

Full postal addre	ss of the site (including full postcode where available	e) C	Description:	
House:	Suffix:			
House name:	Cyclone House			
Street address:	27-29 Whitfield Street			
Town/City:	LONDON			
Postcode:	W1T 2BG			
	cation or a grid reference ted if postcode is not known):			
Easting:	529525			
Northing:	181727			

4. Pre-application Advice			
Has assistance or prior advice been	sought from the local authority about this application?	🔾 Yes 💿	No
5. Description of the Propose	al		
Change of use of basement, ground	approved development as shown on the decision letter: d and first floor to flexible uses (Class use A1/ B1/ D1), second e, rooftop plant enclosure, facade alterations including new fr		
Application reference number:	2016/6495/P	Date of decision:	04/08/2017
Please state the condition number(s Condition number(s):) to which this application relates:		,
4			
Has the development already started	d? 🔾 Yes 💿 No		

6. Discharge of Condition(s)

Please provide a full description and/or list of the materials/details that are being submitted for approval:					
Drawing 51517_D06_01 showing secure, covered cycle storage on lower ground floor to accommodate 5 cycles.					

7. Part Discharge of Condition(s)		٦
Are you seeking to discharge only part of a condition?	🔾 Yes 💿 No	
8. Site Visit		
Can the site be seen from a public road, public footpath, bridleway or other public land? If the planning authority needs to make an appointment to carry out a site visit, whom should they	Yes O No y contact? (Please select only one)	
The agent The applicant Other person		

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

09/08/2017