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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 N	ame, Address and Contact Details							
Title:	First Name:	Sur	rname:					
Company name:	King's Cross Central General Partner Limited							
Street address:	4 Stable Street							
		Telephone number:	02036640200					
		Mobile number:						
Town/City:	London	Fax number:						
Country:	United Kingdom	Email address:						
Postcode:	N1C 4AB	_						
	acting on behalf of the applicant?  e, Address and Contact Details	Yes      No						
Title: Ms	First Name: Kate	Sur	rname: Hogarth					
Company name:	Argent (King's Cross) Ltd							
Street address:	4 Stable Street							
		Telephone number:	02036640178					
		Mobile number:						
Town/City:	London	Fax number:						
Country:	United Kingdom	Email address:						
Postcode:	N1C 4AB	Kate.Hogarth@argen	Kate.Hogarth@argentllp.co.uk					

3. Site Addres	ss Det	tails														
Full postal addre	ss of th	ne site (includi	ng full	postcode	where a	available	<del>)</del> )	Descrip	tion:							
House:			Suff	ix:												
House name:	Weste	ern Transit She	ed													
Street address:	Stable	e Street														
	King's	Cross														
Town/City:	LOND	ON														
Postcode:	N1C 4	 1AB														
Description of lo				'n):												
Easting:	53011															
Northing:	18362	 20														
4. Pre-applica	ation /	Advice														
Has assistance of	or prior	advice been s	ought	from the	local aut	thority al	bout thi	is applica	ation?			Yes	○ No	0		
If Yes, please co	mplete	the following	inform	ation abc	out the ac	dvice you	u were	given (th	is will he	elp the a	authorit	y to deal wi	th this	application more	efficie	ntly):
Officer name:																
Title: Mr		First name:	A	lfie						Surna	ame:	Stroud				
Reference:																
Date (DD/MM/Y)	YYY):			(Must be	pre-appl	ication s	submiss	sion)								
Details of the pre		ation advice re	eceive	d:												
5. Description	n of th	e Proposal	I													
Please provide a										ands w	ithin the	- Kina's Cro	ss Onr	portunity Area, a	s set o	ut in
the Revised De	evelopm	nent Specificat	tion. Th	ne develo	pment c	omprise	s busin	ess and	employr	ment us	ses with	in the B1 us	se clas	s; residential use	es(inclu	uding
and A5 use cla	sses; th	ne full range of	f comn	nunity, he	ealth, edu	ucation,	cultural	l, assem	oly and l	eisure f	facilities	s, within the	DI and	within the A1, A2 d D2 use classes	; night	clubs;
														other developme se new play facil		
														acilitate their refu ings and other w		
the Regent's C																
Application refer	ence nu	umber:	20	04/2307/	P						Date	e of decision	n: [	22/12/2006		
Please state the Condition number		on number(s)	to whic	ch this ap	plication	relates:	:									
		to Condition	18 of L	isted Bui	Iding Co	nsent (re	ef. 2007	7/5230/L	) for the	Easterr	n Good:	s Yard (EG)	/) withi	in the King's Cro	ss Cen	ntral
(KXC) develop	ment.															
Has the develop	ment al	ready started?	? .	Yes	No	If Ye	s, pleas	se state	when the	e develo	opment	was started	i: [	15/05/2007		
Has the develop	ment be	een completed	d? 🔘	Yes	<ul><li>No</li></ul>											
6 Dicahana	-4 C =	n dition (-)														
6. Discharge	OT COL	naition(S)														
Please provide a	a full de	scription and/o	or list c	of the ma	terials/de	etails tha	at are be	eing sub	mitted fo	r appro	val:					

6. Discharge of Condition(s)
<ul> <li>Cover Letter</li> <li>Drawing showing the proposed locations of the devices;</li> <li>Photomontage showing the proposed locations of the devices;</li> <li>Method Statement for the installation of devices;</li> <li>Product specification for Hikvision Dome Device DS 2CD753F-E(1)</li> </ul>
7. Part Discharge of Condition(s)
Are you seeking to discharge only part of a condition?
3. 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 contact? (Please select only one)
The agent
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