

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:	First Name:	Surname: n/a				
Company name:	Herbal House Investments Ltd	]				
Street address:	c/o agent	]				
		Telephone number:				
		Mobile number:				
Town/City:		Fax number:				
Country:		Email address:				
Postcode:						
Are you an agent a	acting on behalf of the applicant?	Yes O No				

2. Agent Name	, Address and C	Contact Details				
Title:	First Name:	Adam		Surname:	Price	
Company name:	Montagu Evans					
Street address:	5 Bolton Street					
			Telephone numb	er: 02078	3668674	
			Mobile number:			
Town/City:	London		Fax number:			
Country:			Email address:			
Postcode:	W1J 8BA		adam.price@mo	ontagu-evans	.co.uk	

3. Site Addres	ss Details					
Full postal addre	ss of the site (including	full postcode v	where available)	Description:		
House:	10 5	Suffix:				
House name:	Herbal House					
Street address:	Back Hill					
Town/City:	LONDON					
Postcode:	EC1R 5EN					
Description of lo						
	cation or a grid reference eted if postcode is not kr					
Easting:	531242					
Northing:	182058					
4. Pre-applica	tion Advice					
Has assistance of	or prior advice been sou	ght from the lo	cal authority abo	out this application?	🔾 Yes 💿	No
5. Description	of the Proposal					
	dependence of the opper			the decision lattor		
Change of use f		ollege (D1) to a	a mixed use com	prising offices (B1) from low		s, three flexible retail/café/office
(A1/A3/B1) unit	s at lower ground, grour	nd and upper g	ground floors and	a flexible commercial galle	ry/office (A1/B1) with and	cillary café at lower-ground floor ditional office (B1) space and
	ed duplex apartments; a					
Application refer	ence number:	2014/3683/P			Date of decision:	06/07/2015
Please state the Condition number	condition number(s) to ver(s):	which this app	lication relates:			
2(c), 7, 14, 17, 1	( )					
Has the develop	ment already started?	💿 Yes 🔾	No If Yes,	please state when the deve	lopment was started:	28/09/2015
-	-	O Voo				
Has the develop	ment been completed?	🔾 Yes 💿	No			
6. Discharge	of Condition(s)					
Please provide a	full description and/or li	ist of the mate	vials/details that :	are being submitted for app	roval:	
	ED COVERING LETTER					
7. Part Discha	arge of Condition(s	;)				
/// wit = .et		')				
Are you seeking	to discharge only part o	f a condition?			🖲 Yes 🔾 No	
If Yes, please ind	dicate which part of the	condition vour	application relate	es to:		

2(c)

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 the	Yes O No ney 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	1	Date	04/09/2017
true and accurate and any opinions given are the genuine opinions of the person(s) giving them.	Ŧ	Dale	
and about the unit of the given are the genance of the percent(s) giving them.			

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