

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:	<input type="text"/>	First Name:	<input type="text"/>	Surname:	<input type="text" value="University College London Hospitals"/>
Company name:	<input type="text" value="University College London Hospitals NHS Foundation Trust"/>				
Street address:	<input type="text" value="c/o Agent"/>				
	<input type="text"/>	Telephone number:	<input type="text"/>		
	<input type="text"/>	Mobile number:	<input type="text"/>		
Town/City:	<input type="text"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text"/>	<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="Miss"/>	First Name:	<input type="text" value="Emily"/>	Surname:	<input type="text" value="Cochrane"/>
Company name:	<input type="text" value="JLL"/>				
Street address:	<input type="text" value="30 Warwick Street"/>				
	<input type="text"/>	Telephone number:	<input type="text" value="02031471632"/>		
	<input type="text"/>	Mobile number:	<input type="text"/>		
Town/City:	<input type="text" value="London"/>	Fax number:	<input type="text"/>		
Country:	<input type="text"/>	Email address:	<input type="text"/>		
Postcode:	<input type="text" value="W1B 5NH"/>	<input type="text" value="emily.cochrane@eu.jll.com"/>			

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. 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:

5. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter:

Erection of a 6 storey building and excavation works to create a 3 storey basement, comprising a head and neck outpatient hospital (Class D1) following demolition of the former UCL Student Union and Royal Ear Hospital buildings

Application reference number:

Date of decision:

Please state the condition number(s) to which this application relates:

Condition number(s):

Condition 2 - parts B, C, D and F

Has the development already started? Yes No If Yes, please state when the development was started:

Has the development been completed? 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:

Please refer to covering letter.

7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition?

Yes No

If Yes, please indicate which part of the condition your application relates to:

Parts B, C, D and F

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

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

20/03/2018