

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 N	ame, Address and C	Contact Details				
Title:	First Name:			Surname:	x	
Company name:	The Hoxton (Holborn) Li	mited				
Street address:	199-203, High Holborn					
			Telephone numb	er:		
			Mobile number:			
Town/City:	London		Fax number:			
Country:			Email address:			
Postcode:	WC1V 7BD					
Are you an agent	acting on behalf of the ap	plicant?	Yes	lo		
2. Agent Name, Address and Contact Details						
Title: Mrs	First Name: Sop	hie		Surname:	Rae	
Company name:	Indigo Planning			Curramo.	Itae	
Street address:	Aldermary House					
Sileet address.				2000		
	10-15 Queen Street		Telephone numb	er: 0203	88482500	
			Mobile number:			
Town/City:	London		Fax number:			
Country:			Email address:			
Postcode:	EC4N 1TX		hannah.brown@	indigoplann	ing.com	

3. Site Addres	ss Details					
Full postal addre	ess of the site (including full postcode where available)	Description:				
House:	Suffix:					
House name:	199-203					
Street address:	High Holborn					
Town/City:	London					
Postcode:	WC1V 7BD					
December of le						
	ocation or a grid reference eted if postcode is not known):					
Easting:	530396					
Northing:	181474					
4. Pre-applica	ation Advice					
Has assistance or prior advice been sought from the local authority about this application? — Yes No						
5. Description	n of the Proposal					
	a description of the approved development as shown on the previous street wing above existing a	he decision letter: service yard, incorporating a living wall and a roof extension above existin				
	ving to accommodate 46 additional hotel rooms (C1)	,,,				
Application reference number: 2017/0200/P Date of decision: 25/01/2018						
Please state the condition number(s) to which this application relates:						
Condition number(s): 16 and 17						
Has the development already started? Yes No						
C Discharge	of Condition(a)					
6. Discharge	of Condition(s)					
Please provide a full description and/or list of the materials/details that are being submitted for approval:						
Please see covering letter						
7. Part Discha	arge of Condition(s)					
Are you seeking	to discharge only part of a condition?					
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 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.

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Date

30/04/2018