

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 Na | ame, Address a | nd Contact Details | | | | | | | | |
|--|-------------------------|--------------------|-----------------|-----------------------------------|--------------|--|--|--|--|--|
| Title: | First Name: | | | Surname: | Pegasus Life | | | | | |
| Company name: | | | | | | | | | | |
| Street address: | C/O Tibbalds | | | | | | | | | |
| | | | Telephone numb | oer: | | | | | | |
| | | | Mobile number: | | | | | | | |
| Town/City: | | | Fax number: | | | | | | | |
| Country: | | | Email address: | | | | | | | |
| Postcode: | | | | | | | | | | |
| Are you an agent | acting on behalf of the | ne applicant? | Yes | lo | | | | | | |
| | | | | | | | | | | |
| 2. Agent Name, Address and Contact Details | | | | | | | | | | |
| Title: Mr | First Name: | Senan | | Surname: | Sector Kelly | | | | | |
| | | | | Surname: | Seaton Kelly | | | | | |
| Company name: | Tibbalds Planning | and Urban Design | | | | | | | | |
| Street address: | 19 Maltings Place | | | | | | | | | |
| | 169 Tower Bridge | Road | Telephone numb | oer: 0203 | 5983968 | | | | | |
| | | | Mobile number: | | | | | | | |
| Town/City: | London | | Fax number: | | | | | | | |
| Country: | | | Email address: | | | | | | | |
| Postcode: | SE1 3JB | | senan.seaton-ke | senan.seaton-kelly@tibbalds.co.uk | | | | | | |

| 3. Site Addres | ss Details | | | |
|-----------------------------------|--|---|----------------------------------|------------------------------------|
| Full postal addre | ess of the site (including full postcode where | available) Description: | | |
| House: | Suffix: | | | |
| House name: | Bartrams Convent Hostel | | | |
| Street address: | Rowland Hill Street | | | |
| | | | | |
| | | | | |
| Town/City: | London | | | |
| Postcode: | NW3 2AD | | | |
| December of the | | | | |
| | cation or a grid reference eted if postcode is not known): | | | |
| Easting: | 527200 | | | |
| Northing: | 185335 | | | |
| | | | | |
| 4. Pre-applica | ation Advice | | | |
| | | | | |
| Has assistance of | or prior advice been sought from the local au | uthority about this application? | Yes | No |
| If Yes, please co | implete the following information about the a | advice you were given (this will he | elp the authority to deal with t | his application more efficiently): |
| Officer name: | | | | |
| Title: Mr | First name: Charles | | Surname: Thuaire | |
| Reference: | | | | |
| Date (DD/MM/Y) | YYY): 19/04/2018 (Must be pre-app | olication submission) | | |
| Details of the pre | e-application advice received: | | | |
| Confirmation that | at the proposed landscaping amendments we | vere considered to be minimal and | d also acceptable in principle | |
| | | | | |
| 5. Description | n of the Proposal | | | |
| Diagram and dates | | and the desired latter. | | |
| | description of the approved development as existing student hostel building (Sui Gener | | 1, 6, 7, 10 storey building plus | s basement to provide extra-care |
| accommodation | n for older people (Class C3), comprising 60 f facilities, plus basement level car parking, o |) flats and associated communal f | facilities including restaurant, | lounges, health and well-being |
| | rd and 6th floor roof terraces. | oyoro and moomly occorr parimi, | у, эдостот ала тот постр | iani, giodina nooi oonimana. |
| Application refere | ence number: 2014/6449/P | | Date of decision: | 28/08/2015 |
| Please state the Condition number | condition number(s) to which this application | on relates: | | |
| 5 | | | | |
| Has the develop | ment already started? Yes No | | | |
| 1.40 1.10 40 10.10 p. | | | | |
| | | | | |
| 6. Discharge | of Condition(s) | | | |
| Please provide a | a full description and/or list of the materials/de | details that are being submitted for | or approval: | |
| | ocuments have been submitted: | 2 | 11 | |
| | nent (including a summary of the proposed cl | changes and revised plans) | | |
| - Cover Letter - Completed app | | • • | | |
| 1 2 2 2 3 3 4 9 1 | | | | |
| | | | | |

| 7. Part Discharge of Condition(s) | | | | | | | | |
|--|-----|---|------|------------|--|--|--|--|
| 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? 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 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 true and accurate and any opinions given are the genuine opinions of the person(s) giving them. | | ~ | Date | 08/05/2018 | | | | |
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