

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	d Contact Details					
Title:	First Name:			Surname:			
Company name:	The Honourable Soc	iety of Lincoln's Inn					
Street address:	c/o agent						
			Telephone numb	er:			
			Mobile number:				
Town/City:			Fax number:				
Country:			Email address:				
Postcode:							
Are you an agent	acting on behalf of the	applicant?	Yes     N	0			
2. Agent Name	e, Address and Co	ontact Details					
Tide	First Names (2	Old -		0	0		
Title:		Chloe		Surname:	Saunter		
Company name:	Montagu Evans LLP						
Street address:	5 Bolton Street						
			Telephone numb	er: 02073	3127480		
			Mobile number:				
Town/City:	London		Fax number:				
Country:			Email address:				
Postcode:	W1J 8BA		chloe.saunter@r	chloe.saunter@montagu-evans.co.uk			

3. Site Addres	ss Details	
Full postal addre	ss of the site (including full postcode where available)	Description:
House:	Suffix:	
House name:	Library and Under Treasure's House	
Street address:	Lincoln's Inn	
	Lincoln's Inn Fields	
Town/City:	London	
Postcode:	WC2A 3TL	
	cation or a grid reference eted if postcode is not known):	
Easting:	530929	
Northing:	181445	
4. Pre-applica	tion Advice	
Has assistance o	or prior advice been sought from the local authority abo	out this application?
5. Description	n of the Proposal	
•	·	
	description of the approved development as shown or	n the decision letter: ing following demolition of Under Treasurer's House, with two storey glazed
link to existing I		provision of 6 cycle spaces, provision of attenuation soakaway, and associated
landscaping.	ence number: 2015/4408/P	Date of decision: 01/06/2016
Application refere	condition number(s) to which this application relates:	Date of decision.
Condition number		
5		
Has the develop	ment already started?   Yes   No If Yes,	please state when the development was started: 18/07/2016
Has the develop	ment been completed?   Yes   No	
6. Discharge	of Condition(s)	
Please provide a	full description and/or list of the materials/details that a	are being submitted for approval:
Please see acco	ompanying 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 s	een from a public road, public footpath, bridleway or of	ther public land?
If the planning au	uthority needs to make an appointment to carry out a si	ite visit, whom should they contact? (Please select only one)

8. Site Visit			
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	Date	22/05/2018	

true and accurate and any opinions given are the genuine opinions of the person(s) giving them.

22/05/2018

 $\checkmark$ 

Date