

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. Site Address				
Number				
Suffix				
Property name	Former Royal Ear Hospital			
Address line 1	Capper Street and Huntley Street			
Address line 2				
Address line 3				
Town/city	London			
Postcode	WC1E 6AP			
Description of site location must be completed if postcode is not known:				
Easting (x)	529518			
Northing (y)	182064			
Description				

2. Applicant Details				
Title				
First name				
Surname	University College London Hospitals			
Company name	University College London Hospitals NHS Foundation Trust			
Address line 1	C/O Agent			
Address line 2				
Address line 3				
Town/city				

## 2. Applicant Details

Country	
Postcode	
Primary number	
Secondary number	
Fax number	
Email address	

Are you an agent acting on behalf of the applicant?

🖲 Yes 🛛 🔍 No

3. Agent Details		
Title	Miss	
First name		
Surname	Emily	
Company name	Cochrane	
Address line 1	30 Warwick Street	
Address line 2		
Address line 3		
Town/city	LONDON	
Country	United Kingdom	
Postcode	w1b 5nh	
Primary number	02031471632	
Secondary number		
Fax number		
Email	emily.cochrane@eu.jll.com	

## 4. 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				
Reference number				
2015/1281/P				
Date of decision (date must be pre- application submission)	20/01/2016			
Please state the condi	tion number(s) to which this application relates			
Condition number(s)				
6				

If Yes, please state when the development was started (date must be pre- application submission)	31/12/2016		
Has the development b	een completed?	◯ Yes ● No	
5. Part Discharge	of Conditions		
Are you seeking to disc	harge only part of a condition?	Q Yes 💿 No	
6. Discharge of Co			
Please provide a full de	scription and/or list of the materials/details that are being	submitted for approval	
Waste Management Pla	an		
7. Site Visit			
Can the site be seen fro	om a public road, public footpath, bridleway or other pub	ic land?  Ic land? Ic Ves ONO	
If the planning authority The agent The applicant Other person	needs to make an appointment to carry out a site visit, w	vhom should they contact? (Please select only one)	
8. Pre-application	Advice		
Has assistance or prior	advice been sought from the local authority about this a	pplication? Q Yes  No	
9. Declaration			

🖲 Yes 🛛 🔾 No

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 (cannot be preapplication)

4. Description of the Proposal Has the development already started?