

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.

1. Site Address

Number

Suffix

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.

Property name	Great Ormond Street Childrens Hospital, Southwood Building	
Address line 1	Great Ormond Street	
Address line 2		
Address line 3		
Town/city	London	
Postcode	WC1N 3JH	
Description of site loc	cation must be completed if postcode is not known:	
Easting (x)	530434	
Northing (y)	182085	
Description		
2. Applicant Det		
Title	Other	
Other		
First name		
Surname	-	
Company name	Great Ormond Street Hospital	
Address line 1	Southwood Building	
Address line 2	Great Ormond Street	
Address line 3		

2. Applicant Deta	ils			
Town/city	London			
Country				
Postcode	WC1N 3JH			
Primary number				
Secondary number				
Fax number				
Email address				
Are you an agent actin	g on behalf of the applicant?	Yes	○ No	
3. Agent Details				
Title	Ms			
First name	Joanna			
Surname	Turner			
Company name	BDP			
Address line 1	16			
Address line 2	Brewhouse Yard			
Address line 3	Islington			
Town/city	London			
Country				
Postcode	EC1V 4LJ			
Primary number	02078128937			
Secondary number				
Fax number				
Email	joanna.turner@bdp.com			
4. Description of	the Proposal			
Please provide a descri	ription of the approved development as shown on the dec	sision letter		
three storey building to theatre; a two storey lin works.	provide 998 sq.m (GEA) of healthcare space, including nk to the Variety Club Building, entrance ramps and stairs	physiotherapy and rehabilitation facilities and an iMs, a green roof, cycle parking, artificial lighting, plan	RI suite and operating t equipment and associated	
Reference number				
2017/3377/P				
Date of decision (date must be pre- application submission)				
Please state the condition number(s) to which this application relates				
Condition number(s)				

4. Description of the Proposal	
4	
Has the development already started?	⊋Yes
5. Part Discharge of Conditions	
Are you seeking to discharge only part of a condition?	○ Yes
6. Discharge of Conditions	
Please provide a full description and/or list of the materials/details that are being submitted for approved	al
1.Brickwork plinth- Staffs Blue with grey pointing to match that to the adjacent Variety Club Building. E	Brick panel to be built.
Kalwall – sample on site.     Windows, panels, doors and louvres - PPC Silver Grey RAL 9006.	
4.Self coloured render – Colour samples awaited. 5.Plant grilles, pipes and penthouse units will be silver grey.	
7. 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 con	start? (Please select only one)
The agent	nact: (Flease Select Offig Offe)
□ The applicant	
Other person	
8. Pre-application Advice	
Has assistance or prior advice been sought from the local authority about this application?	○ Yes   ● No
	2 TO THE
9. Declaration	
I/we hereby apply for planning permission/consent as described in this form and the accompanying pl that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given a	
Date (cannot be pre- 06/09/2018	
application)	