

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						
Address line 1						
Address line 2						
Address line 3						
Town/city						
Postcode						
Description of site location must be completed if postcode is not known:						
Easting (x)	529925					
Northing (y)	183803					
Description						
Buildings T2-T3 Development Zone T King's Cross Central London N1C 4BD						

2. Applicant Details					
Title	Mr				
First name	Stefano				
Surname	Longhi				
Company name	Bennetts Associates				
Address line 1	1 rawstorne place				
Address line 2					
Address line 3					
Town/city	London				

2. Applicant Details

Country	United Kingdom			
Postcode	EC1V 7NL			
Primary number	02075203300			
Secondary number				
Fax number				
Email address	stefano.longhi@bennettsassociates.com			
Are you an agent acting on behalf of the applicant?				

🔍 Yes 🛛 💿 No

3. Agent Details

No Agent details were submitted for this application

4. Description of the Proposal

Condition 3 and 5 are in full.

Please provide a description of the approved development as shown on the decision letter

for erection of two build centre in T2 at ground f T2. Associated cycle ar conditions 9, 10, 14, 16 22/12/06 (subject to S1 lands within the King's	lings, T2 (part 9, part 10 storeys) and T3 (part 10, part 12 floor (Class D1), flexible commercial/office/leisure units a nd car parking, refuse store, storage and plant areas pro -22, 27, 28, 31, 33- 36, 45, 46, 48, 49, 50A, 51, 56, 60 a 06 agreement) for a comprehensive, phased, mixed-use	art of the ground floor from D1 (primary health care centre) to B1 (office), minor			
Reference number					
	erved Matters Approval] endments to Reserved Matters Approval]				
Date of decision (date must be pre- application submission)	27/03/2019				
Please state the condi	tion number(s) to which this application relates				
Condition number(s)					
Conditions 2 a) [part on	lly], 2b) [part only], 2c), 2d), 2e), 3 and 5				
Has the development already started?		Yes ONO			
If Yes, please state when the development was started (date must be pre- application submission)	01/08/2018				
Has the development been completed?		◯ Yes			
5. Part Discharge	of Conditions				
Are you seeking to disc	● Yes □ No				
If Yes, please indicate which part of the condition your application relates to					
Conditions 2 a) [part only] and 2b) [part only], and 2c), 2d) and 2e) Public Realm under conditions 2c), 2d) and 2e) will be submitted by Argent via application					

Planning Portal Reference: PP-08183883

6. Discharge of Conditions

Please provide a full description and/or list of the materials/details that are being submitted for approval

Transmittal Sheet 1503_TS_0190 listing the documents issued via extranet [Material and finishes sample sheets and digital copy of the drawings] for approval of the materials and finishes, and the details, reserved by conditions 2a), 2b), 2c), 2d), 2e), 3 and 5.

7. Site Visit

7. One visit					
Can the site be seer	n from a public road, public footpath, bridleway or other pub	lic land?	Yes	◯ No	
If the planning author The agent The applicant Other person	rity needs to make an appointment to carry out a site visit,	whom should they contact?			
 8. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently): 					
Officer name:					
Title	Mr				
First name	Patrick				
Surname	Marfleet				
Reference					
Date (Must be pre-a	pplication submission)				

Details of the pre-application advice received

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.

Date (cannot be preapplication) 27/09/2019