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## Application for Approval of Details Reserved by Condition

Town and Country Planning Act 1990 (as amended); Planning (Listed Buildings and Conservation Areas) Act 1990 (as amended)

## 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.

Site Location		
Disclaimer: We can only make recommendation	ns based on the answers g	iven in the questions.
If you cannot provide a postcode, the description help locate the site - for example "field to the No		ompleted. Please provide the most accurate site description you can, to
Number	4	
Suffix		
Property Name		
St Pancras Hospital		
Address Line 1		
St Pancras Way		
Address Line 2		
Address Line 3		
Camden		
Town/city		
London		
Postcode		
NW1 0PE		
Description of site location must	be completed if p	ostcode is not known:
Easting (x)		Northing (y)
529678		183626
Description		

Applicant Details
Name/Company
Title
First name
Surname
_
Company Name
Moorfields Eye Hospital NHS Foundation Trust, University College London Institute of Ophthalmology and Moorfields Eye Charity
Address
Address line 1
c/o agent
Address line 2
70 St Mary Axe
Address line 3
Town/City
London
Country
UK
Postcode
EC3 8BE
Are you an agent acting on behalf of the applicant?
Contact Details
Primary number
**** REDACTED *****
Secondary number

Fax number	
Email address	
***** REDACTED *****	
Agent Details	
Name/Company	
Title	
Miss	
First name	
Jenni	
Surname	
Cooper	
Company Name	
Montagu Evans	
Address	
Address line 1	
70 St Mary Axe	
Address line 2	
Address line 3	
Town/City	
London	
Country	
Postcode	
EC3A 8BE	
Contact Details	
Primary number	
***** REDACTED ******	
Secondary number	

Fax number
Email address
***** REDACTED *****
Description of the Proposal
Please provide a description of the approved development as shown on the decision letter
Partial redevelopment of the site, involving the demolition of seven existing buildings (Ash House, Bloomsbury Day Hospital, the Camley Centre, Jules Thorn Day Hospital, Kitchen and the Post Room & Former Mortuary) and construction of a part seven, part ten storey (plus roof plant) purpose-built eyecare, medical research and educational centre for Moorfields Eye Hospital, the UCL Institute of Ophthalmology and Moorfields Eye Charity.
New building to comprise a mixture of clinical, research and education purposes, including eye care accident and emergency department, outpatients, operating theatres, research areas, education space, cafe and retail areas, admin space and plant space.
Associated site relandscaping works including formation of patient drop off area to St Pancras way, new public realm and routes through the site, cycle parking and servicing ramp and cross over to Granary street.
Reference number
2020/4825/P
Date of decision (date must be pre-application submission)
05/08/2022
Please state the condition number(s) to which this application relates
Condition number(s)
31B
Has the development already started?
O Yes
⊗ No
Part Discharge of Conditions
Are you seeking to discharge only part of a condition?
<ul><li></li></ul>
If Yes, please indicate which part of the condition your application relates to
Part B
Discharge of Conditions

Discharge of Conditions
Please provide a full description and/or list of the materials/details that are being submitted for approval
Please refer to covering letter.
Site Visit
Can the site be seen from a public road, public footpath, bridleway or other public land?
<ul><li>✓ Yes</li><li>○ No</li></ul>
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?
<ul><li></li></ul>
Other person
Pre-application Advice
Has assistance or prior advice been sought from the local authority about this application?
○ Yes ⊙ No
Declaration
I / We hereby apply for Approval of details reserved by a condition (discharge) as described in this form and 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 options of the persons giving them. I / We also accept that: Once submitted, this information will be transmitted to the Local Planning Authority and, once validated by them, be made available as part of a public register and on the authority's website; our system will automatically generate and send you emails in regard to the submission of this application.
✓I / We agree to the outlined declaration
Signed
Jenni Watson
Jenni Watson  Date
Date