

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 Removal or Variation of a Condition following Grant of Planning Permission or Listed Building Consent

# 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 recommendations based on the answers given in the questions.

If you cannot provide a postcode, the description of site location must be completed. Please provide the most accurate site description you can, to help locate the site - for example "field to the North of the Post Office".

Number	5	
Suffix		
Property Name		
Address Line 1		
St Cross Street		
Address Line 2		
Hatton Garden		
Address Line 3		
Town/city		
London		
Postcode		
EC1N 8UB		
Description of site location must be completed if postcode is not known:		
Easting (x)	Northing (y)	
531298	181872	

# **Applicant Details**

### Name/Company

Title

First name

### Surname

Johnson Hatton Office Unit Trust

#### Company Name

Johnson Hatton Office Unit Trust

### Address

#### Address line 1

C/O Iceni Projects

#### Address line 2

#### Address line 3

### Town/City

London

County

Country

Postcode

EC1N 8FH

Are you an agent acting on behalf of the applicant?

⊘ Yes

⊖ No

### **Contact Details**

Primary number

Secondary number

Fax number

Email address

# **Agent Details**

# Name/Company

Title

Miss

First name

Tasha

Surname

Bullen

### Company Name

Iceni Projects

### Address

Address line 1

Da Vinci House

Address line 2

44 Saffron Hil

Address line 3

#### Town/City

London

County

Country

#### Postcode

EC1N 8FH

### **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

 Creation of 4th floor roof terrace

 Reference number

 2021/4246/P

 Date of decision (date must be pre-application submission)

 09/03/2022

 Please state the condition number(s) to which this application relates

 Condition number(s)

 2

 Has the development already started?

 () Yes

 () No

## Condition(s) - Variation/Removal

Please state why you wish the condition(s) to be removed or changed

Please refer to submitted covering letter.

If you wish the existing condition to be changed, please state how you wish the condition to be varied

Please refer to submitted covering letter

# 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 contact?

⊘ The agent

O The applicant

O Other person

### **Pre-application Advice**

Has assistance or prior advice been sought from the local authority about this application?

⊘ Yes

() No

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

\*\*\*\*\* REDACTED \*\*\*\*\*\*

#### First Name

\*\*\*\*\* REDACTED \*\*\*\*\*\*

#### Surname

\*\*\*\*\* REDACTED \*\*\*\*\*\*

Reference

Date (must be pre-application submission)

21/10/2022

Details of the pre-application advice received

Please see submitted covering letter

### **Ownership Certificates and Agricultural Land Declaration**

Certificates under Article 14 - Town and Country Planning (Development Management Procedure) (England) Order 2015 (as amended)

Please answer the following questions to determine which Certificate of Ownership you need to complete: A, B, C or D.

Is the applicant the sole owner of all the land to which this application relates; and has the applicant been the sole owner for more than 21 days?

⊘ Yes ○ No

Is any of the land to which the application relates part of an Agricultural Holding?

() Yes

⊘ No

### Certificate Of Ownership - Certificate A

I certify/The applicant certifies that on the day 21 days before the date of this application nobody except myself/ the applicant was the owner\* of any part of the land or building to which the application relates, and that none of the land to which the application relates is, or is part of, an agricultural holding\*\*

\* "owner" is a person with a freehold interest or leasehold interest with at least 7 years left to run.

\*\* "agricultural holding" has the meaning given by reference to the definition of "agricultural tenant" in section 65(8) of the Act.

NOTE: You should sign Certificate B, C or D, as appropriate, if you are the sole owner of the land or building to which the application relates but the land is, or is part of, an agricultural holding.

Person Role

O The Applicant

The Agent

#### Title

#### Miss

#### First Name

Tasha

Surname

Bullen

#### **Declaration Date**

30/11/2022

Declaration made

### Declaration

I / We hereby apply for Removal/Variation of a condition 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

Tasha Bullen

Date

30/11/2022