

PP-13380720 Development Control Development and Street Scene London Borough of Richmond upon Thames Civic Centre, 44 York Street, Twickenham TW1 3BZ

Tel: 0845 612 2660 Email: envprotection@richmond.gov.uk

## 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 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	
Cuffin	
Suffix	
Property Name	
Royal Hospital	
Address Line 1	
Kew Foot Road	
Address Line 2	
Address Line 3	
Richmond Upon Thames	
Town/city	
Richmond	
Postcode	
TW9 2TE	
Description of site location must	be completed if postcode is not known:
Easting (x)	Northing (y)
518154	175563
Description	

# **Applicant Details**

# Name/Company

Title

First name

### Surname

UKI Richmond

Company Name

## Address

### Address line 1

Seymour Mews House

#### Address line 2

#### Address line 3

#### Town/City

London

County

### Country

United Kingdom

### Postcode

Are you an agent acting on behalf of the applicant?

⊘Yes ⊖No

# **Contact Details**

Primary number

Fax number

Email address

# **Agent Details**

# Name/Company

Title

First name

#### Surname

Falconer Chester Hall

#### Company Name

Falconer Chester Hall Ltd

## Address

### Address line 1

12 Temple Street

Address line 2

Address line 3

#### Town/City

Liverpool

County

#### Country

United Kingdom

## Postcode

L2 5RH

## **Contact Details**

Primary number

***** REDACTED *****	
econdary number	
ax number	
nail address	
***** REDACTED *****	

# **Description of the Proposal**

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

(1) Conversion of the existing health facilities (use class D1) to a mixed-use development providing 71 no. residential apartments (use class C3) and 500 sqm of D1 (Health) floorspace. (2) Restoration, alteration, extensions and demolition (mainly of later additions) to the existing buildings, new build and provision of a lower ground floor basement (car parking, plant and servicing) and associated landscaping. (3) Listed building consent for the refurbishment and restoration of Shaftesbury House (Grade II listed), conversion of existing health facilities (use class D1) to residential apartments (use class C3) and all ancillary and associated works.

Reference number

18/3950/FUL

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

15/07/2019

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

Condition number(s)

NS22(b) - Noise Protection - Residential

Has the development already started?

⊘ Yes

⊖ No

If Yes, please state when the development was started (date must be pre-application submission)

25/01/2021

Has the development been completed?

⊖ Yes

⊘No

## Part Discharge of Conditions

Are you seeking to discharge only part of a condition?

⊘ Yes

⊖ No

If Yes, please indicate which part of the condition your application relates to

NS22(a) has been previously discharged. This application is to satisfy the remainder, NS22(b)

## **Discharge of Conditions**

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

We submit herewith an Acoustic Technical Note from RBA acoustics for approval/discharge of all remaining parts to condition NS22 [namely part b]

# Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

⊘ Yes

 $\bigcirc$  No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact?

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

## Declaration

I/We hereby apply for Approval of details reserved by a condition (discharge) as described in the questions answered, details provided, 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.

I/We also accept that, in accordance with the Planning Portal's terms and conditions:

- Once submitted, this information will be made available to the Local Planning Authority and, once validated by them, be published 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

Falconer Chester Hall

### Date

04/09/2024