

FINANCIAL VIABILITY ASSESSMENT

NORTHWOOD & PINNER
COTTAGE HOSPITAL

PINNER ROAD

LONDON

HA6 1DE

23RD MARCH 2021



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01

EXECUTIVE SUMMARY

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1. This report constitutes a Financial Viability Assessment (FVA) in accordance with planning policy and has been prepared by Montagu Evans LLP on behalf of NHS Property Services and NHS Hillingdon CCG (hereafter the Applicant) to support an application for planning permission on the site known as Northwood & Pinner Cottage Hospital, Pinner Road, HA6 1DE (the Site) in the London Borough of Hillingdon (hereafter LBH).
2. The Site currently accommodates two buildings: Northwood Health Centre and the Pinner Cottage Hospital. Pinner Cottage Hospital is currently largely vacant. Northwood Health Centre, although currently fully occupied and operational, is reaching the end of its serviceable life and is becoming unfit for purpose. A new health centre is required to service the needs of the local community.
3. The planning application seeks permission for:

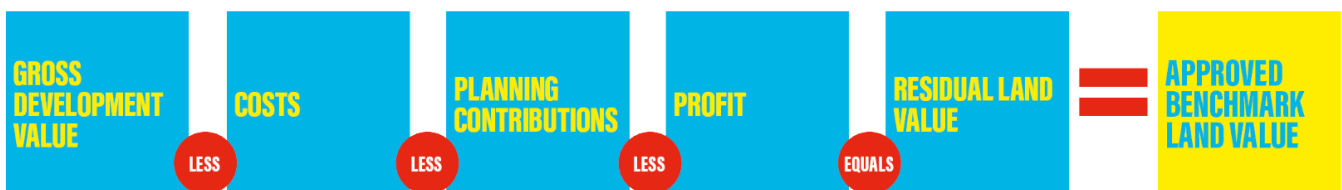
“Partial demolition, refurbishment and extension of the existing Cottage Hospital to provide a state of the art health centre and the comprehensive redevelopment of the remaining Site to provide residential (use class C3) accommodation and ancillary works including car parking, cycle parking, landscaping and associated works (phased).”
4. In the absence of other funding sources, the Applicant is reliant on the residential element of development proposals to cross-fund the provision of the new health centre. This is therefore an ‘enabling development’ scenario, with the residential apartments enabling the delivery of the new health centre.
5. Montagu Evans have been instructed by the Applicant to carry out a Financial Viability Assessment (FVA) to assess whether the land receipt from the disposal of the residential element would be sufficient to enable the delivery of the new health centre, and whether there is any land receipt surplus over and above the delivery costs of the health centre which could contribute towards affordable housing.
6. In order to achieve this, we have carried out a residual appraisal of the residential element of proposals in isolation, and have compared the output of this appraisal with the delivery cost of the new health centre, which in this instance represents the Benchmark Land Value.
7. This report has been prepared by Will Seamer, BA MSc MRICS, RICS Registered Valuer, who is a viability specialist and Partner of Montagu Evans LLP.
8. At the present time we do not consider the land receipt generated by even a 100% private iteration of the residential element to be sufficient to fully fund the delivery of the new health centre. However we have carried out a sensitivity analysis to show that, in a competitive bidding scenario for the residential site, potential purchasers may make more bullish assumptions than our own, which would increase the price they could pay for the land to a level sufficient to enable delivery of the health centre. However even this scenario assumes that the 70 residential units would all be for private sale. Introducing affordable housing into the scheme would further depress viability and may threaten delivery of the health centre.

02

INTRODUCTION & APPROACH

INTRODUCTION & APPROACH

- 1 We set out below our Financial Viability Assessment (FVA) which has been prepared on behalf of the Applicant in support of the planning application.
- 2 The report has been prepared in accordance with RICS valuation guidance and with regard to relevant guidance on preparing FVAs for planning purposes. However, it is not a 'Red Book' valuation and should not be relied upon as such.
- 3 In undertaking the FVA we have acted:
 - With objectivity;
 - Impartially;
 - Without interference; and
 - With reference to all appropriate available sources of information.
- 4 We are not aware of any conflicts of interest and can confirm that no performance related or contingent fees have been agreed.
- 5 For planning purposes, viability is assessed by comparing the residual land value generated by the proposed development with an appropriate Benchmark Land Value (BLV).
- 6 The residual land value of the proposed development is arrived at by summing the revenues derived from the development and deducting from these the costs of development (including an appropriate profit allowance).
- 7 There are a number of different approaches adopted in order to reach an acceptable BLV depending on site specific factors. In this instance, the BLV is the cost of delivering the new health centre. If the residual land value generated by the residential element of proposals is equal to the health centre delivery costs, then the scheme is viable and the health centre is deliverable. If the residual land value is higher than the delivery costs, the scheme is viable and there is surplus available to fund affordable housing. If the residual land value is lower than the health centre delivery costs, then the scheme is not viable and the health centre would not be deliverable.



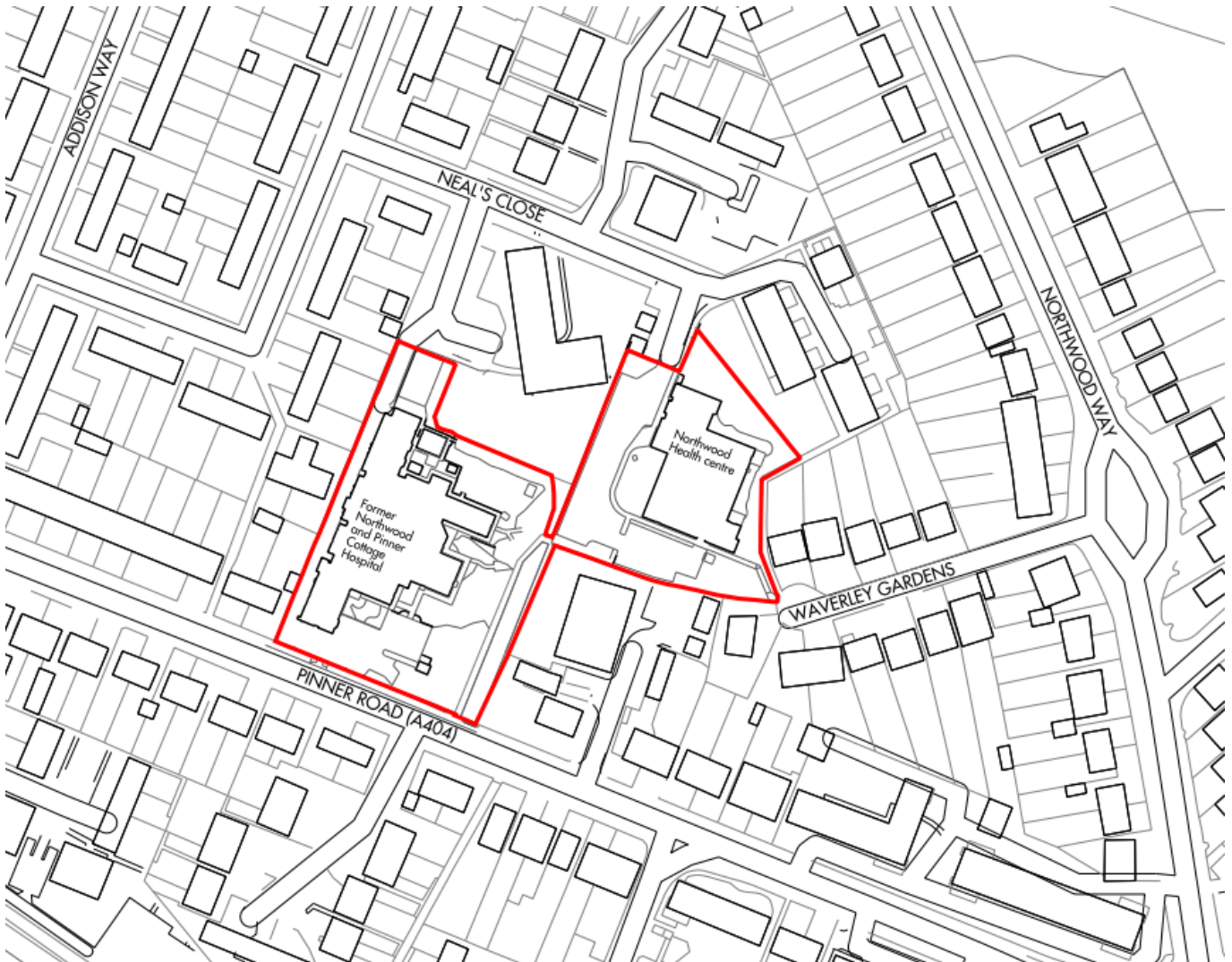
- 8 The residual land value of the proposed development has been modelled using the industry recognised Argus Developer software. This report will provide a summary of the development proposals and set out the assumptions and evidence used to undertake the residual appraisal. The results of the residual appraisal will then be compared with the BLV and conclusions will be provided.

03

EXISTING PROPERTY

EXISTING PROPERTY

- 1 The site, outlined in red below, is approximately 1.00 hectares (2.47 acres) and is situated to the north of Pinner Road circa 0.30 miles north west of Northwood Hills Underground Station (Metropolitan Line).
- 2 The Site currently accommodates two existing buildings:
 - i) The Northwood Health Centre (GIA 10,344 sq ft), a single storey brick built building dating from the 1980s. Although currently fully occupied and operational, the existing health centre is reaching the end of its serviceable life and is becoming unfit for purpose. A new health centre is required to service the needs of the local community.
 - ii) The Pinner Cottage Hospital, (GIA 21,783 sq ft), a Locally Listed two storey building dating from 1924. The Cottage Hospital is currently largely vacant but is part occupied by the London Ambulance Service
- 3 We provide as **Appendix 1** plans for the existing buildings.



04

DEVELOPMENT PROPOSALS

DEVELOPMENT PROPOSALS

1 The proposals are for:

- i) Demolition of existing Health Centre, to be replaced by two blocks of new build residential apartments, each over ground and three upper storeys, collectively providing 70 units with associated car and cycle parking.
- ii) Partial demolition of the Cottage Hospital, with extension and refurbishment of remaining elements to provide a new health centre of 1,473 m2 GIA.

It is hoped that the receipt from the sale of the consented residential element will enable the delivery of the new health centre.

2 The proposed residential unit mix is 31 x 1-beds (44%), 34 x 2-beds (49%) and 5 x 3-beds (7%). There are to be 69 car parking spaces and 111 cycle parking spaces.

3 We provide a full set of plans and residential accommodation schedule as **Appendix 2**.

05

PLANNING CONTEXT

PLANNING CONTEXT

NATIONAL PLANNING POLICY

- 1 A central aspect of the NPPF is the promotion of healthy communities. Paragraph 92 stipulates that planning decisions should plan for local services that enhance the sustainability of communities and residential environments.
- 2 Paragraph 34 of the National Planning Policy Framework (NPPF) confirms that the contributions expected from development, including the levels and types of affordable housing provision, should not undermine the deliverability of the relevant plan.
- 3 Paragraph 56 confirms that planning obligations should only be sought where they are:
 - necessary to make the development acceptable in planning terms;
 - directly related to the development; and
 - fairly and reasonably related in scale and kind to the development.
- 4 Paragraph 57 goes on to state:

“Where up-to-date policies have set out the contributions expected from development, planning applications that comply with them should be assumed to be viable. It is up to the applicant to demonstrate whether particular circumstances justify the need for a viability assessment at the application stage. The weight to be given to a viability assessment is a matter for the decision maker, having regard to all the circumstances in the case, including whether the plan and the viability evidence underpinning it is up to date, and any change in site circumstances since the plan was brought into force. All viability assessments, including any undertaken at the plan-making stage, should reflect the recommended approach in national planning guidance, including standardised inputs, and should be made publicly available.”

- 5 Paragraph 122 underlines how planning policies and decisions should support development that makes efficient use of land, *“taking into account local market conditions and viability”*. Key in this instance is the significant cost of delivering the new health centre, and the absence of other external funding sources to deliver it.

LOCAL PLANNING POLICY (LONDON)

- 6 London Plan (March 2021) Policy S2 (Health and social care facilities) states that *“development proposals that support the provision of high-quality new and enhanced facilities to meet identified need and new models of care should be supported”*.
- 7 The London Plan states at Policy 3.11 that boroughs should set an overall target for the amount of affordable housing provision in their area based on an assessment of all housing needs and a realistic assessment of supply.
- 4 The London Plan requires that affordable housing is provided on sites which have capacity to provide 10 or more homes.

- 5 London Plan Policy H4 sets a strategic target for 50% of all new homes delivered across London to be genuinely affordable. All schemes are expected to maximise the delivery of affordable housing and to make the most efficient use of available resources.
- 6 Policy H5 of the London Plan details the Threshold Approach to viability. Applications on which provide 35% affordable housing by habitable room (or 50% by habitable room on public land or on industrial land where there is no net loss), and meet the relevant tenure split set out in Policy H6 (30% low cost rent, 30% intermediate, 40% to be determined by the borough) can follow the Fast Track Route. This means they need not provide a viability assessment at the application stage. The Mayor of London's *Affordable Housing and Viability Supplementary Planning Guidance* (SPG) (August 2017) provides further support to the Threshold Approach.
- 7 Applications that do not meet the requirements of the Fast Track Route must follow the Viability Tested Route – meaning a viability submission is required to support the application.

LOCAL PLANNING POLICY (LB HILLINGDON)

- 8 At a local level, Policy H2 (Affordable Housing) of the Local Plan Part 1 states that housing provision is expected to include a range of housing to meet the needs of all types of households and the Council will seek to maximise the delivery of affordable housing from all sites over the period of the Hillingdon Local Plan Part 1. For all sites with a capacity of 10 or more units, the Council will seek to ensure that the affordable housing mix reflect housing needs in the Borough, particularly the need for larger family units.
- 9 Furthermore Policy DMH 7 (Provision of Affordable Housing) of the Local Plan Part 2 states that on all sites capable of delivering 10 or more units will be required to maximise the delivery of on-site affordable housing. Subject to viability and if appropriate in all circumstances, a minimum of 30% of all new homes on sites of 10 or more units should be delivered as affordable housing. This should include a tenure split of 70% Social/Affordable Rent and 30% Intermediate.

06

BENCHMARK LAND VALUE

BENCHMARK LAND VALUE

- 1 This is an enabling development whereby the land receipt generated from the future sale of the consented residential element is required to fund the delivery of the new health centre.
- 2 The cost of delivering the new health centre within the former Cottage Hospital has been estimated by Gardiner & Theobald, at £3,410,000. We provide the cost estimate as **Appendix 3**, and summarise it below. These figures include prelims, overheads & profit and contingency, but exclude professional fees.

NEW HEALTH CENTRE	
Demolition & Enabling Works	£99,151
Base Build	£2,668,056
External Works & Public Realm	£639,330
Total	£3,410,000

- 3 We have allowed for a market standard professional fee budget of 10.00% of construction costs for the new health centre, taking the total delivery costs to £3,751,000. A figure of £3,751,000 represents the tipping point for the delivery of the new health centre. If the land receipt from the sale of the residential portion of the site (i.e. the residual land value generated by the proposed 70 apartments) is below £3,751,000, this may render the new health centre undeliverable. However a residential residual land value of £3,751,000 or above would ensure delivery of the new health centre, potentially with the ability to deliver affordable housing within the proposed 70 residential units.
- 4 A figure of £3,751,000 is therefore represents the Benchmark Land Value (BLV) in this instance. The residual land value generated by the residential element of proposals in isolation must be compared with this BLV in order to assess overall viability.

07

VIABILITY APPRAISAL ASSUMPTIONS

VIABILITY APPRAISAL ASSUMPTIONS

DEVELOPMENT REVENUES

PRIVATE RESIDENTIAL VALUES

- 1 We have considered achieved sales prices for new build schemes in the local area when pricing the proposals. There is a dearth of recent new build schemes in close proximity to the subject Site. However we consider Silverwood on Rickmansworth Road circa 0.7 miles north west of the subject Site (HA6 2QG) to be very relevant. This 24-unit new build flatted scheme was delivered by Howarth Homes. Practical completion occurred in Q1 2019 and the scheme sold out during Q3 2020. We summarise below the achieved sales prices.

Unit	Unit Type	NSA sq ft	Price Paid	Price psf	Sale date
FLAT 20	1-bed	635	£360,000	£567	29/08/2019
FLAT 21	1-bed	700	£385,000	£550	20/11/2019
FLAT 2	1-bed	549	£390,000	£710	19/03/2020
FLAT 11	1-bed	646	£444,995	£689	11/04/2019
FLAT 12	1-bed	689	£450,000	£653	17/09/2019
FLAT 19	1-bed	646	£460,000	£712	12/04/2019
1-bed Average		644	£414,999	£644	
FLAT 5	2-bed	689	£474,995	£689	12/03/2019
FLAT 3	2-bed	721	£485,000	£673	11/04/2019
FLAT 6	2-bed	861	£495,000	£575	28/11/2019
FLAT 1	2-bed	775	£499,995	£645	11/04/2019
FLAT 22	2-bed	936	£510,000	£545	27/09/2019
FLAT 10	2-bed	850	£524,995	£618	12/04/2019
FLAT 17	2-bed	861	£534,995	£621	17/05/2019
FLAT 14	2-bed	818	£539,995	£660	12/04/2019
FLAT 13	2-bed	818	£540,000	£660	20/12/2019
FLAT 24	2-bed	883	£549,995	£623	12/04/2019
FLAT 7	2-bed	861	£554,995	£645	11/04/2019
FLAT 9	2-bed	969	£599,995	£619	12/07/2019
FLAT 23	2-bed	1,076	£599,995	£558	03/02/2020
2-bed Average		855	£531,535	£622	
FLAT 4	3-bed	1,163	£713,000	£613	15/11/2019
FLAT 16	3-bed	1,378	£737,230	£535	12/04/2019
FLAT 8	3-bed	1,378	£799,995	£581	12/04/2019
3-bed Average		1,306	£750,075	£574	
OVERALL AVERAGE		859	£529,553	£616	

- 2 Further afield at 107 Marsh Road (HA5 5PA) circa 2 miles to the south east of the subject Site is Riverside Place. This is a 28 unit office to residential conversion scheme carried out under Permitted Development Rights. The scheme complete in 2016. We are aware of two recent resales within the scheme. In October 2020 a 689 sq ft 2-bed unit sold for £470,000 (£682 per sq ft). In October 2019 a 592 sq ft 1-bed unit sold for £375,000 (£633 per sq ft). We consider this to be a superior location closer to central London and to transport links.
- 3 Based on the above data, we have at this stage applied a value of £650 per sq ft to the residential units.

GROUND RENTS

- 4 In order to qualify for Help to Buy Phase 2, which comes live in April 2021, freeholders are prevented from charging ground rents to occupiers. The proposed scheme will rely very heavily on Help to Buy 2, which will underpin sales values and sales rates as it has done for many similar schemes in similar value areas of London. All of the units in the proposed scheme will qualify for Help to Buy, since they are all priced at £600,000 or below. Therefore no ground rents will be chargeable at this scheme, and no such income has been included in our appraisal. We note that our adopted sales values of £650 per sq ft reflect the lack of ground rent income, i.e. they assume a share of freehold.

DEVELOPMENT COSTS

CONSTRUCTION COSTS

- 5 We have been provided with a residential construction cost plan by quantity surveyors Gardiner & Theobald. The cost plan (attached as **Appendix 4**) attributes base build costs (including preliminaries, overheads & profit and contingencies) of £20,190,000 which we have included in our appraisal.

PROFESSIONAL FEES

- 6 The Gardiner & Theobald cost estimate excludes professional fees so we have allowed for a 10.00% budget in our appraisal.

MARKETING & DISPOSAL FEES

- 7 We have allowed for marketing costs of 1.00% of residential GDV.
- 8 Sales agent and legal fees have been included at 1.50% and 0.25% of residential GDV respectively.

COMMUNITY INFRASTRUCTURE LEVY (CIL) AND S106

- 9 We have been advised to include the following estimated CIL contributions in our appraisal:
- Mayoral CIL 2: £161,887
 - LBH CIL: £611,828
- 10 S106 financial contributions have been included at £2,000 per unit.

DEVELOPER'S RETURN

- 11 Market uncertainty remains high as the Covid-19 pandemic continues to unfold. Current levels of risk are therefore elevated, and are unlikely to subside for many months or longer. Consequently, developers, funders and investors are seeking higher returns to insulate against these risks. Indeed many are choosing not to invest or proceed with development at all at the present time, regardless of estimated returns.
- 12 Within the Viability Planning Practice Guidance (PPG) for the NPPF it states that “*an assumption of 15-20% of gross development value (GDV) may be considered a suitable return to developers*”. Current market conditions justify profit levels at the upper end of the range outlined in the PPG. There are a number of independent viability assessors representing Councils that are currently adopting a margin of 20.00% on GDV. Indeed there is an

argument that current unprecedented market conditions as a result of the pandemic would justify a profit margin above the range in the NPPF.

- 13 Despite the above, we have at this stage adopted a margin of 17.50% on residential GDV, in the middle of the PPG range. This is on a without prejudice basis and we reserve the right to revisit this in due course.

FINANCE

- 14 Costs have been financed over the development period at a combined finance rate of 6.50%. We consider this bullish given the current development debt market.

DEVELOPMENT TIMESCALES

- 15 We have adopted the following timescales (for the residential element in isolation).
- Pre-construction period (to account for discharge of planning conditions and demolition) – 6 months;
 - Construction period – 18 months;
 - Sales period – 9 months (with 50% of residential units sold off plan, equating to post-completion sales rate of 4 units per month).
- 16 In particular we consider our sales rate assumption to be bullish in the current climate, and we reserve the right to revisit this.

08

VIABILITY RESULTS & CONCLUSIONS

VIABILITY RESULTS & CONCLUSIONS

- 1 We attach the viability appraisal at **Appendix 5**. The residual land value generated by the proposed 70 residential apartments, on the assumption that they are all delivered for private sale, is £780,759. This is circa £2,970,000 below the Benchmark Land Value of £3,751,000. Our current viability modelling therefore shows that the proposed residential apartments would not be able to fully fund the healthcare element, even if they were delivered as 100% private housing.
- 2 For viability testing purposes our assumptions must reflect current day values and costs. However, under competitive tension, bidders for the residential portion of the Site may make more bullish assumptions than our own. For example they might assume growth in residential sales values, or a degree of value engineering of build costs. To illustrate the potential impact of this we have carried out a sensitivity analysis. Were sales values to increase by 7.50% and construction costs to decrease by 7.50% compared to the levels assumed in this report, the residual land value generated by the residential element would increase to a level broadly in line with the benchmark land value. On this basis the residential element of the proposals could wholly fund the new health centre. However this would only be on the basis of all 70 units being for private sale.

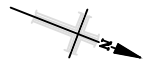


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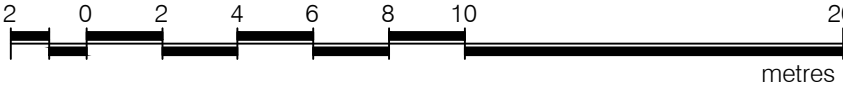
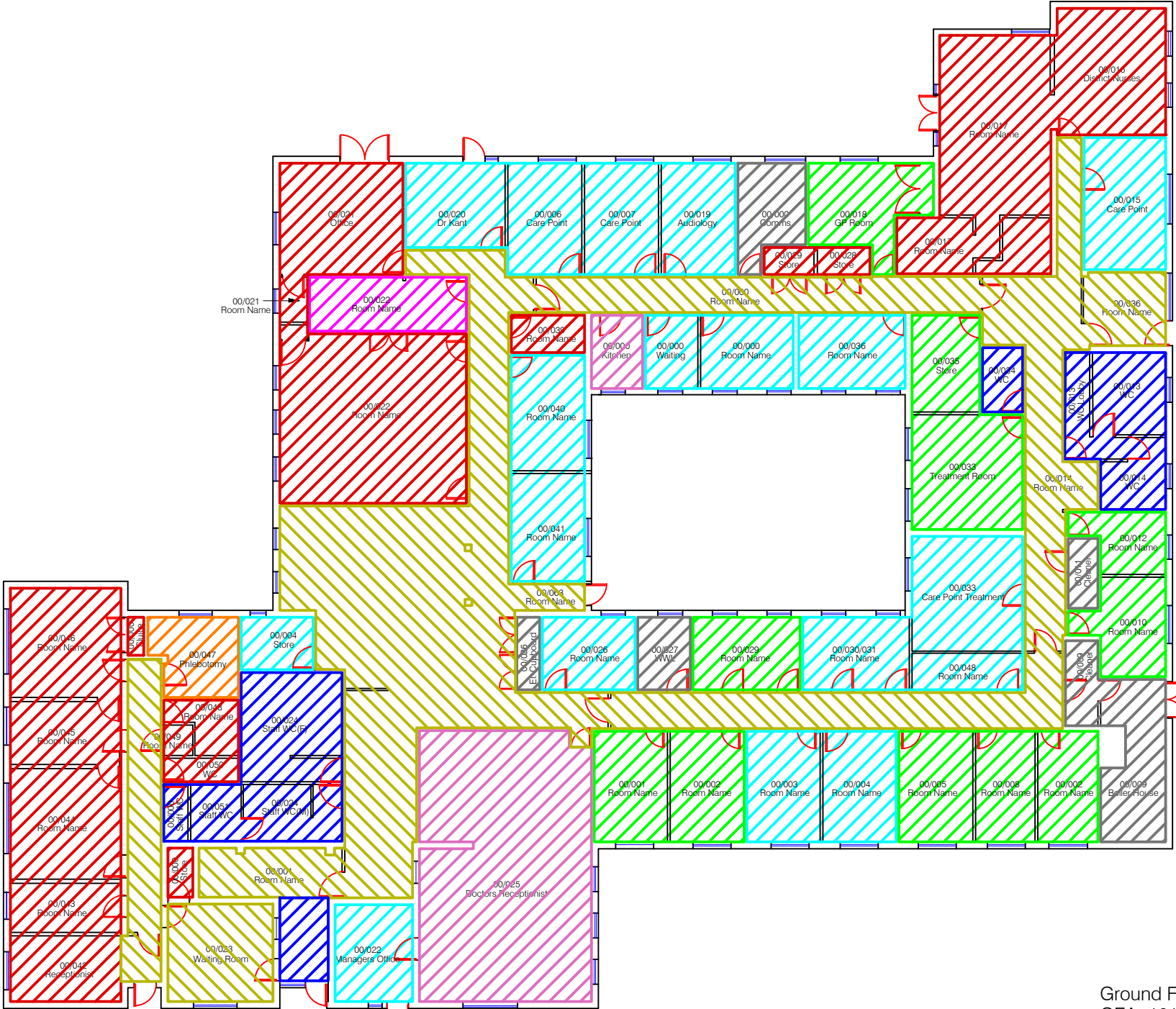
APPENDIX 01

EXISTING HEALTH CENTRE FLOORPLANS



Approximate Direction North

	01100	NIA	201.23 m²
	01110	NIA	118.54 m²
	01120	NIA	188.00 m²
	01130	NIA	11.35 m²
	01140	NIA	8.88 m²
	01150	NIA	66.89 m²
	NHSPS Shared Area	NIA	226.00 m²
	NHSPS Common Parts	GIA	51.23 m²
	NHSPS Retained Area	GIA	35.38 m²

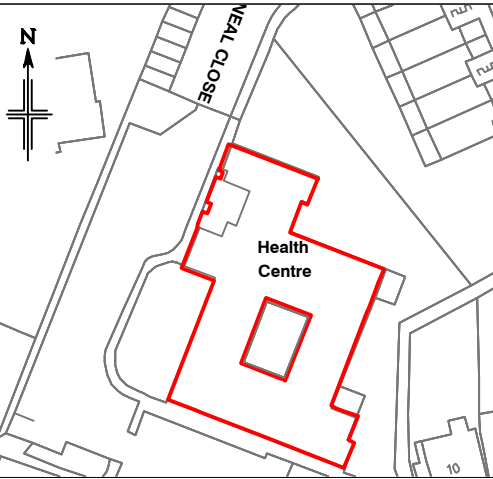


Ground Floor*
GEA 1011.85 m²
GIA 960.89 m²
NIA 840.84 m²
*Whole floor areas, not the sum of parts listed above

CAD EXERCISE ONLY

This drawing has been made compliant by Plowman Craven using drawings supplied by NHS Property Services.

Plowman Craven accept no responsibility for floor plan inaccuracies. This floor plan has not been verified by on-site measurements.



Location Plan

Scale 1:1250

Building Outline

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Notes:

Date	Comments	Rev.
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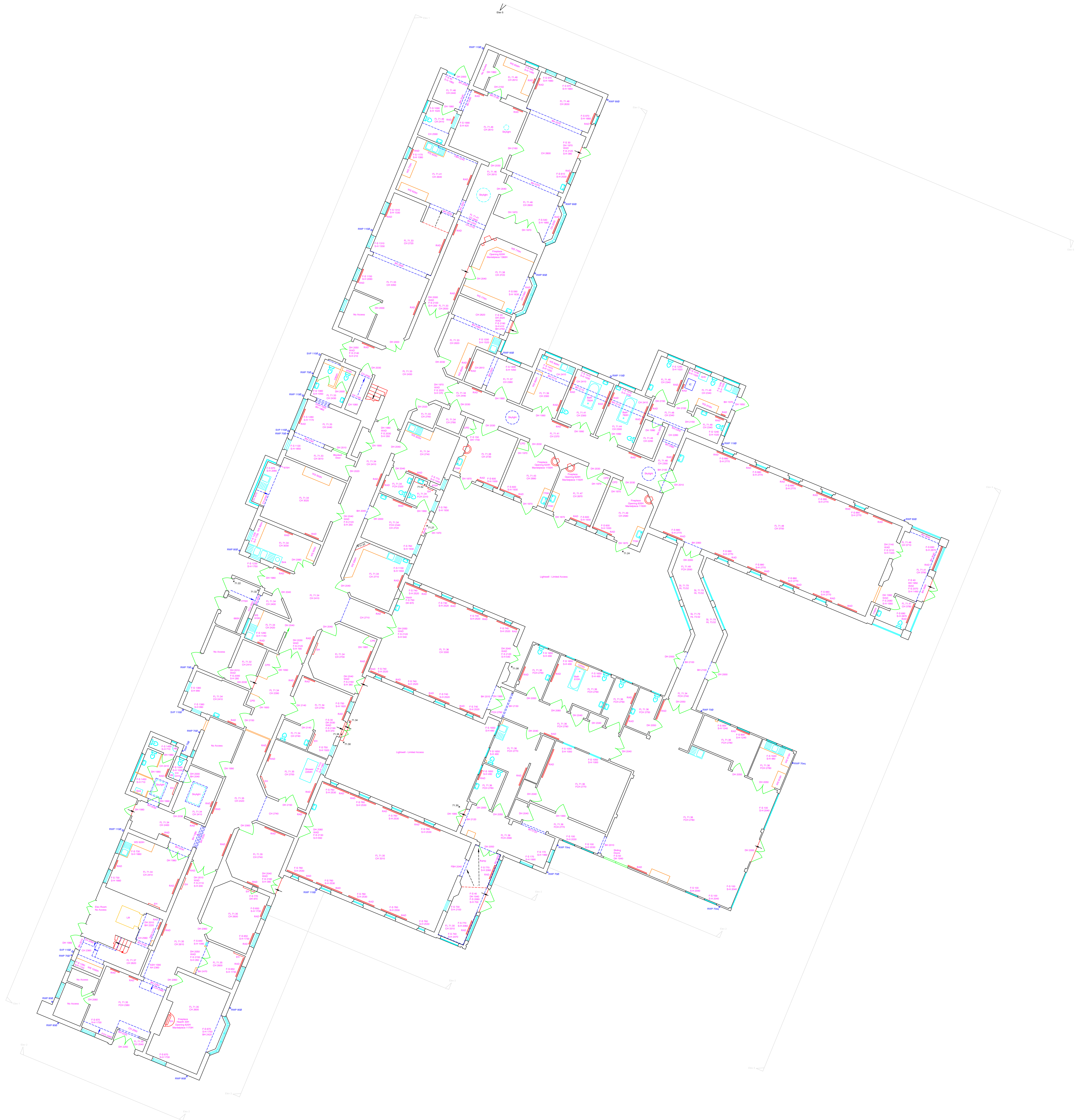


Property Services

Site Address

NORTHWOOD HEALTH CENTRE
NEAL CLOSE
ACRE WAY
NORTHWOOD
HA6 1TQ

Site	Orig.	Role	Level	Type	Rev.
NOHC02B01	PC	CAD	GF	FP	R04
Floor/Level			GROUND FLOOR		
Scale			1:200 @ A3		
Date			NOVEMBER 2006		



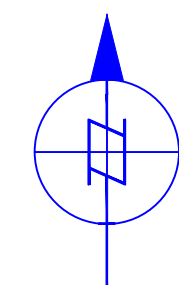
LEGEND

AH	Arch Height
ASH	Arch Spring Height
BL	Beam Level
BH	Beam Height
CAH	Ceiling Arch Height
CH	Ceiling Height
CL	Ceiling Level
CPD	Cupboard
CSH	Ceiling Spring Height
DH	Door Height
DOH	Door Opening Height
DP	Downpipe
DR	Drain
F.H	Floor - Head Height
F.S	Floor - Sill Height
FBH	Fake Beam Height
FCH	Fake Ceiling Height
FL	Floor Level
G	Gully
GL	Ground Level
H	High
HB	Hand Bath
HTR	Heated Towel Rail
HWT	Hot Water Tank
IC	Inspection Cover
RAD	Radiator
RL	Roof Level
RWP	Rainwater Pipe
SAH	Sill - Arch Height
SH	Sill - Head Height
SSH	Sill - Spring Height
SHW	Shower
SVP	Soil Vent Pipe
VP	Vent Pipe
WAD	Window Above Door
WAW	Window Above Window
WC	Water Closet
WS	Work Surface
---	Floor Level Steps Up
---	Ceiling Level Steps Up

NOTES

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The OS levels shown have been derived via multiple Network RTK GPS Observations.



DRAWING NO.	3888-2
DATE	27/7/17
DESIGN	MAW
SHEET NO.	2 of 6
CHECKED	MB
SCALE	1:100
SHEET SIZE	A0

CLIENT

NHS Property Services Ltd
99 Gresham Street
London
EC2V 7NG

PROJECT TITLE

Ground Floor Plan
Former Northwood & Pinner Hospital
Pinner Road
Northwood, HA6 1DE

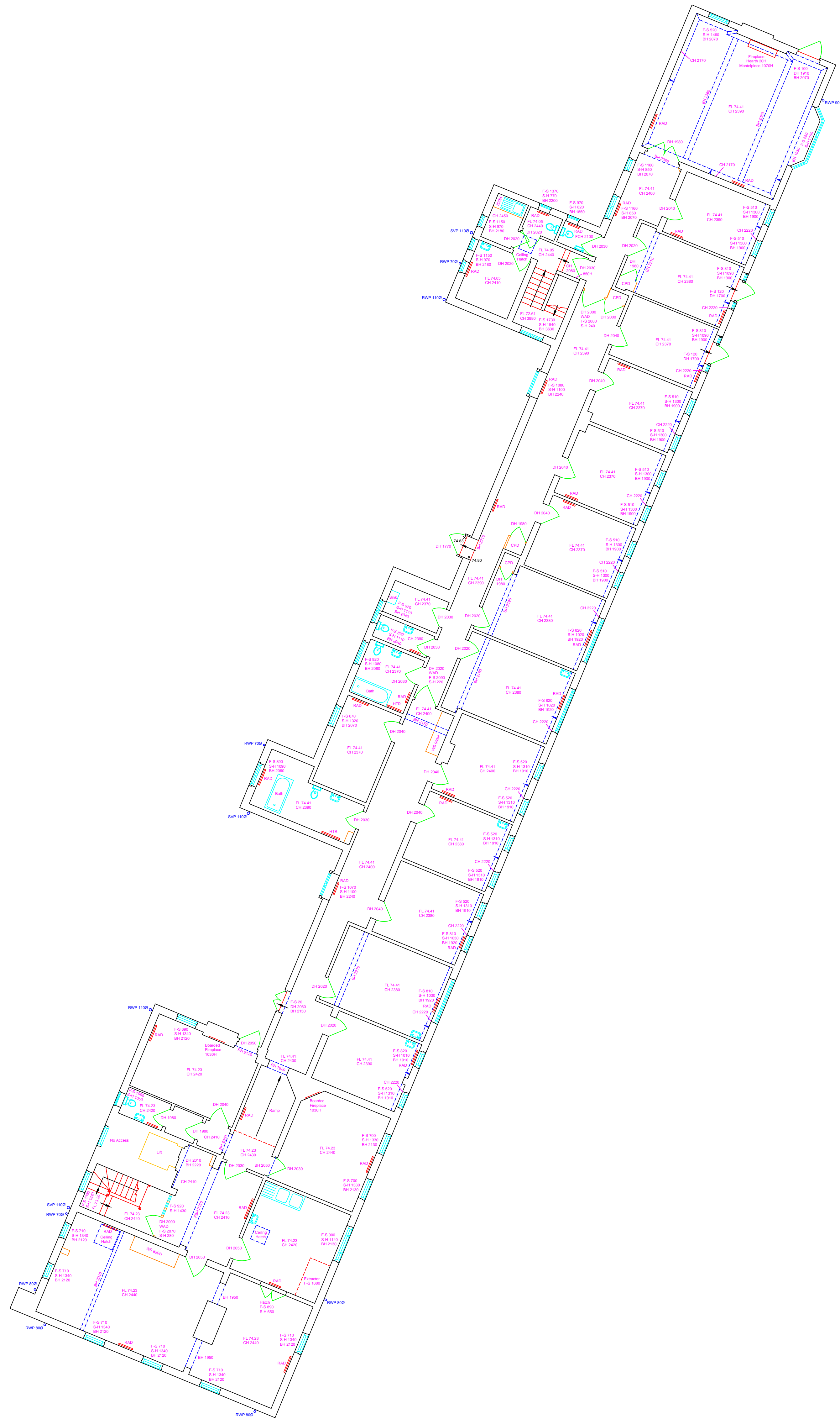
SURVEYED BY

ARA

ALAN RHODES ASSOCIATES
Land & Measured Building Surveyors
8 Hurlingham Studios
Ranelagh Gardens
London SW6 3PA

Tel : 020 7731 0304
Fax: 020 7731 0314
email : office@ara-survey.co.uk



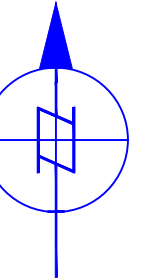


LEGEND		
AH	Arch Height	
ASH	Arch Spring Height	
BH	Beam Height	
BL	Beam Level	
CAH	Ceiling Arch Height	
CH	Ceiling Height	
CL	Ceiling Level	
CPD	Cupboard	
CSH	Ceiling Spring Height	
DH	Door Height	
DCH	Door Opening Height	
DP	Downpipe	
DR	Drainer	
F-H	Floor - Head Height	
F-S	Floor - Sill Height	
FBH	False Beam Height	
FCH	False Ceiling Height	
FL	Floor Level	
G	Gully	
GL	Ground Level	
H	High	
HB	Hand Bath	
HTR	Heated Towel Rail	
HWT	Hot Water Tank	
IC	Inspection Cover	
RAD	Radiator	
RL	Roof Level	
RWP	Rainwater Pipe	
S-AH	Sill - Arch Height	
S-H	Sill - Head Height	
S-SH	Sill - Spring Height	
SHW	Shower	
SVP	Soil Vent Pipe	
VP	Vent Pipe	
WAD	Window Above Door	
WAW	Window Above Window	
WC	Water Closet	
WS	Work Surface	
---	Floor Level Slopes Up	
----	Ceiling Level Slopes Up	

NOTES

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DATE	27/7/17	DRAWN: MAW
SHEET NO	3 of 6	CHECKED: MB
SCALE	1:100	SHEET SIZE: A0

CLIENT

NHS Property Services Ltd
99 Gresham Street
London
EC2V 7NG

PROJECT TITLE

First Floor Plan
Former Northwood & Pinner Hosptia
Pinner Road
Northwood, HA6 1DE

SURVEYED BY

ARA

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APPENDIX 02

PROPOSED PLANS & AREA SCHEDULE

NHS

Northwood and Pinner

Planning Application



Planning Drawings (A3 size)

March 2021

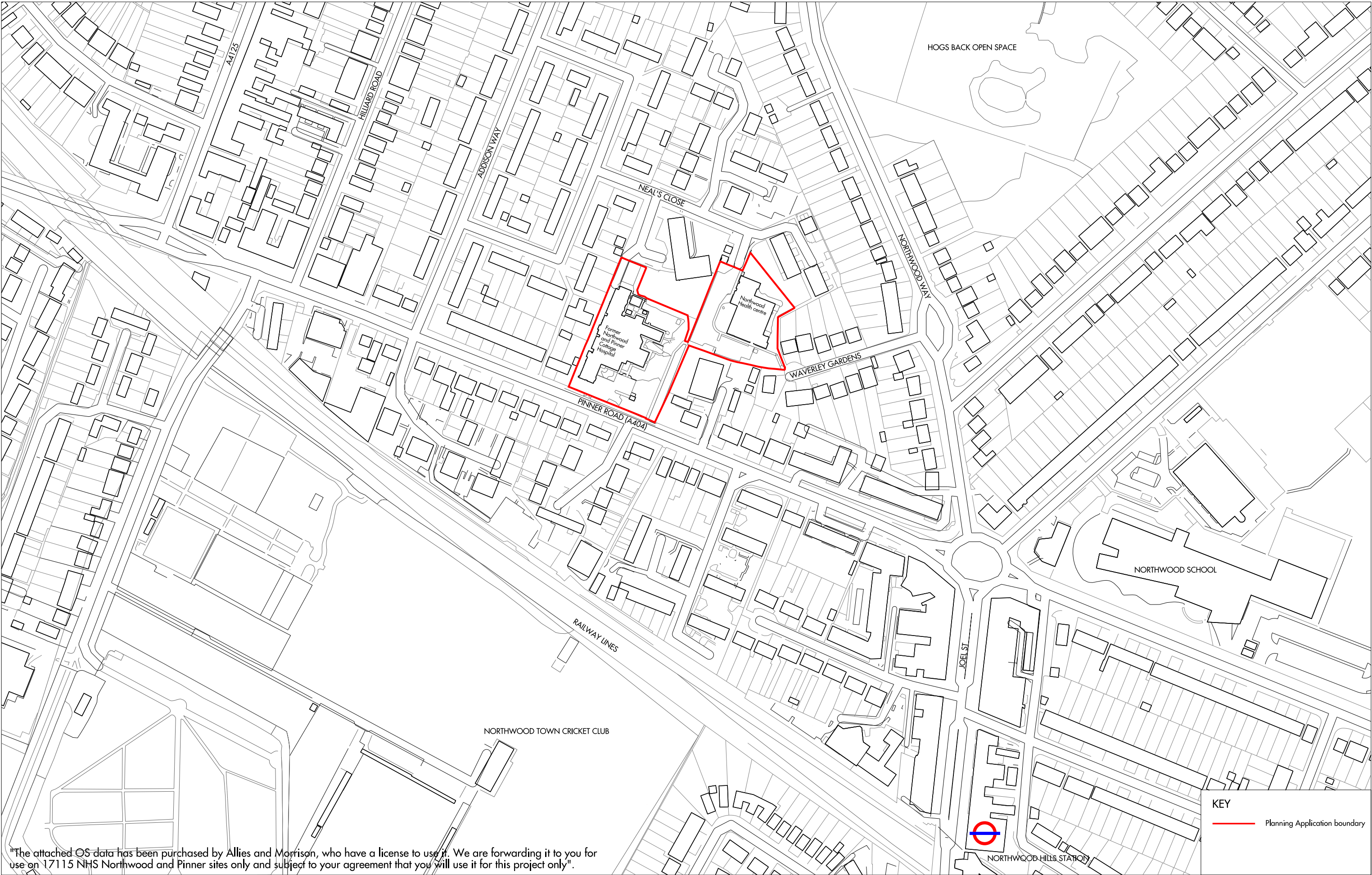
Allies and Morrison

Drawing number	Drawing title	scale	size
Site			
17115-05_00_07_001	Site Location Plan	1:1250	@A1
17115-05_00_07_002	Site Boundary	1:500	@A1
Existing			
17115-05_00_07_010	Existing Site: Ground floor plan	1:250	@A1
17115-05_00_07_011	Existing Site: First floor plan	1:250	@A1
17115-05_00_07_020	Existing Sitewide Elevations	1:250	@A1
17115-05_00_07_021	Existing Cottage Hospital Elevations - Sheet 1	1:100	@A1
17115-05_00_07_022	Existing Cottage Hospital Elevations - Sheet 2	1:100	@A1
Proposed			
Sitewide			
17115-05_00_07_051	Proposed Site wide Access and Routes	1:500	@A1
17115-05_00_07_052	Proposed Site wide Emergency Services access	1:500	@A1
17115-05_00_07_053	Proposed Site wide Parking Strategy	1:500	@A1
17115-05_00_07_054	Proposed Site wide: Refuse Strategy		
17115-05_00_07_100	Proposed Level 00 Sitewide plan	1:250	@A1
17115-05_00_07_104	Proposed Roof Level Sitewide plan	1:250	@A1
17115-05_00_07_200	Proposed Sitewide Elevations	1:250	@A1
Plans			
17115-05_HC_07_100	Healthcare Centre: Proposed Level 00 plan	1:100	@A1
17115-05_HC_07_101	Healthcare Centre: Proposed Level 01 plan	1:100	@A1
17115-05_HC_07_102	Healthcare Centre: Proposed Roof plan	1:100	@A1
17115-05_A_07_100	Block A Residential: Proposed Level 00 plan	1:100	@A1
17115-05_A_07_101	Block A Residential: Proposed Level 01 plan	1:100	@A1
17115-05_A_07_102	Block A Residential: Proposed Level 02 plan	1:100	@A1
17115-05_A_07_103	Block A Residential: Proposed Level 03 plan	1:100	@A1
17115-05_A_07_104	Block A Residential: Proposed Roof plan	1:100	@A1
17115-05_B_07_100	Block B Residential: Proposed Level 00 plan	1:100	@A1
17115-05_B_07_101	Block B Residential: Proposed Level 01 plan	1:100	@A1
17115-05_B_07_102	Block B Residential: Proposed Level 02 plan	1:100	@A1
17115-05_B_07_103	Block B Residential: Proposed Level 03 plan	1:100	@A1
17115-05_B_07_104	Block B Residential: Proposed Roof plan	1:100	@A1
Elevations			
17115-05_HC_07_200	Healthcare Centre: Proposed Elevations sheet 1	1:100	@A1
17115-05_HC_07_201	Healthcare Centre: Proposed Elevations sheet 2	1:100	@A1
17115-05_A_07_200	Block A Residential: Proposed Elevations sheet 1	1:100	@A1
17115-05_A_07_201	Block A Residential: Proposed Elevations sheet 2	1:100	@A1
17115-05_B_07_200	Block B Residential: Proposed Elevations sheet 1	1:100	@A1
17115-05_B_07_201	Block B Residential: Proposed Elevations sheet 2	1:100	@A1
Sections			
17115-05_HC_07_300	Healthcare Centre: Proposed Sections	1:100	@A1
17115-05_A_07_300	Block A Residential : Proposed Sections	1:100	@A1
17115-05_B_07_300	Block B Residentia: Proposed Sections	1:100	@A1
Bay Studies			
17115-05_HC_07_400	Healthcare Centre: West elevation infill Bay Study	1:25	@A1
17115-05_HC_07_401	Healthcare Centre: New extension Bay Study	1:25	@A1
17115-05_HC_07_402	Healthcare Centre: Entrance Canopy Bay Study	1:50	@A1
17115-05_00_07_400	Block A & B: East / West elevation Bay Study	1:50	@A1
17115-05_00_07_401	Block A & B: North / South elevation Bay Study	1:50	@A1
17115-05_00_07_402	Block A & B: Porches & Bays Bay Study	1:50	@A2
Landscape			
SY619-100-001	Proposed Landscape Plan	1:250	@A1
SY619-100-002	Response to existing Trees Plan	1:500	@A1
SY619-100-003	Proposed Tree Planing Plan	1:500	@A1

Table 1 Planning drawing list

Note :
Building / code
Site wide / 00
Healthcare Centre / HC
Block A Residential / A
Block B Residential / B

1 SITE



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A&M JOB NO: 17115_05

NHS - NORTHWOOD AND PINNER, LONDON

SITE LOCATION PLAN

PLANNING

17115_05_00_07_001

SCALE 1:1250 @A1 1:2500@A3

P1

Revision



KEY

Planning Application boundary

Client ownership boundary
(Client to review)

Client negotiating ownership of area

FT E

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NHS - NORTHWOOD AND PINNER, LONDON
SITE BOUNDARY
PLANNING
17115_05_00_07_002
SCALE 1:500 @A1 1:1000@A3

P1
Revision

telephone
facsimile
email

A&M JOB NO: 17115_05

2 EXISTING



KEY

Planning Application boundary

Existing buildings on site

FT E

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A&M JOB NO: 17115_05

NHS - NORTHWOOD AND PINNER, LONDON

EXISTING SITE: GROUND FLOOR PLAN

PLANNING

17115_05_00_07_010

SCALE 1:250 @A1 1:500@A3

P1

Revision



KEY

Planning Application boundary

Existing buildings on site

Figured dimensions are in millimetres unless noted otherwise. All dimensions and levels shall be verified on site before proceeding with works. Detailed site survey to be carried out to verify positions and level relationships with site features and ordinance survey. The Architect must be notified of any discrepancy. Boundaries are indicative only and are to be verified by others.

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P1	12.03.2021	ISSUED FOR PLANNING	AO

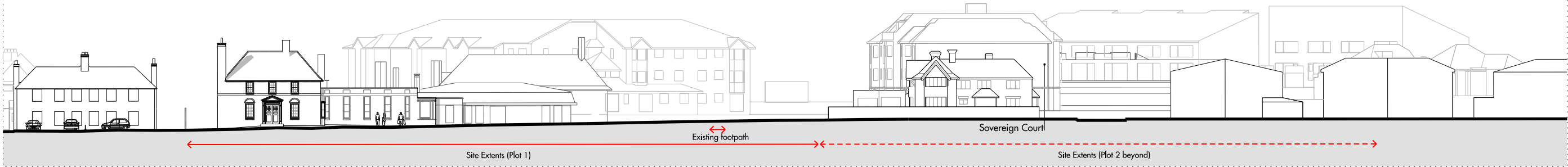
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A&M JOB NO: 17115_05

NHS - NORTHWOOD AND PINNER, LONDON
EXISTING SITE: FIRST FLOOR PLAN
PLANNING
17115_05_00_07_011
SCALE 1:250 @A1 1:500@A3

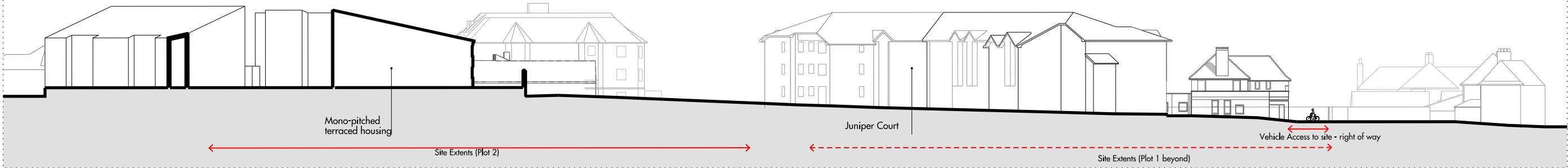
P1

Revision

Northwood & Pinner Cottage Hospital elevations are based on survey drawings. Window detail is based on that survey, in a few instances (south, south-east, north-east elevation) some more detail has been added from observation. Currently access to some areas is restricted and most windows are boarded.



01 EXISTING SITEWIDE ELEVATION - PINNER ROAD

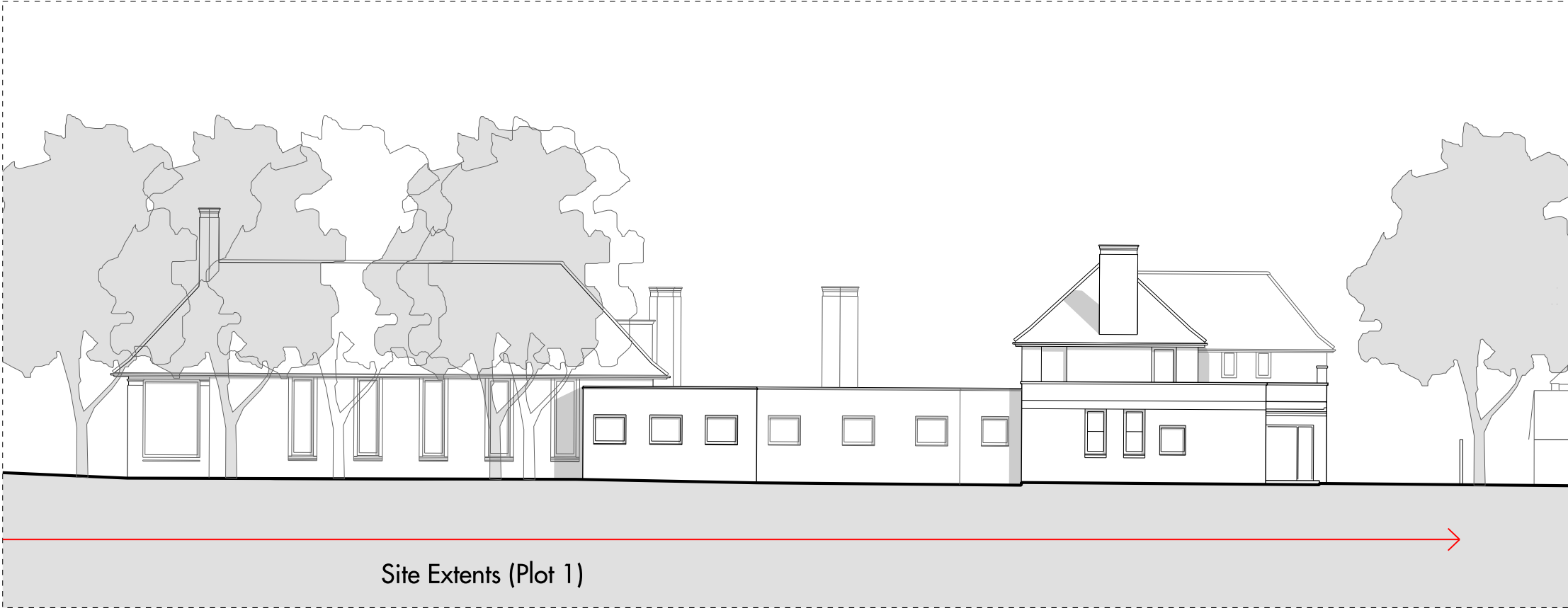


02 EXISTING SITEWIDE ELEVATION - NEAL'S CLOSE

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NHS - NORTHWOOD AND PINNER, LONDON
EXISTING SITEWIDE ELEVATIONS
PLANNING
17115_05_00_07_200
SCALE 1:250 @A1 1:500@A3

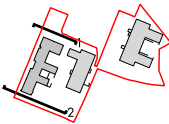


Northwood & Pinner Cottage Hospital elevations are based on survey drawings. Window detail is based on that survey, in a few instances (south, south-east, north-east elevation) some more detail has been added from observation. Currently access to some areas is restricted and most windows are boarded.

01 NORTH ELEVATION



02 SOUTH ELEVATION - Pinner Road



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NHS - NORTHWOOD AND PINNER, LONDON
EXISTING COTTAGE HOSPITAL: ELEVATIONS SHEET 1
PLANNING
17115_05_00_07_021

SCALE 1:100 @A1 1:200@A3

P1

Revision

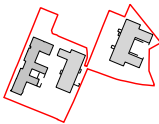
Northwood & Pinner Cottage Hospital
elevations are based on survey drawings.
Window detail is based on that survey, in a few
instances (south, south-east, north-east
elevation) some more detail has been added
from observation. Currently access to some
areas is restricted and most windows are
boarded.



01 EAST ELEVATION



02 WEST ELEVATION



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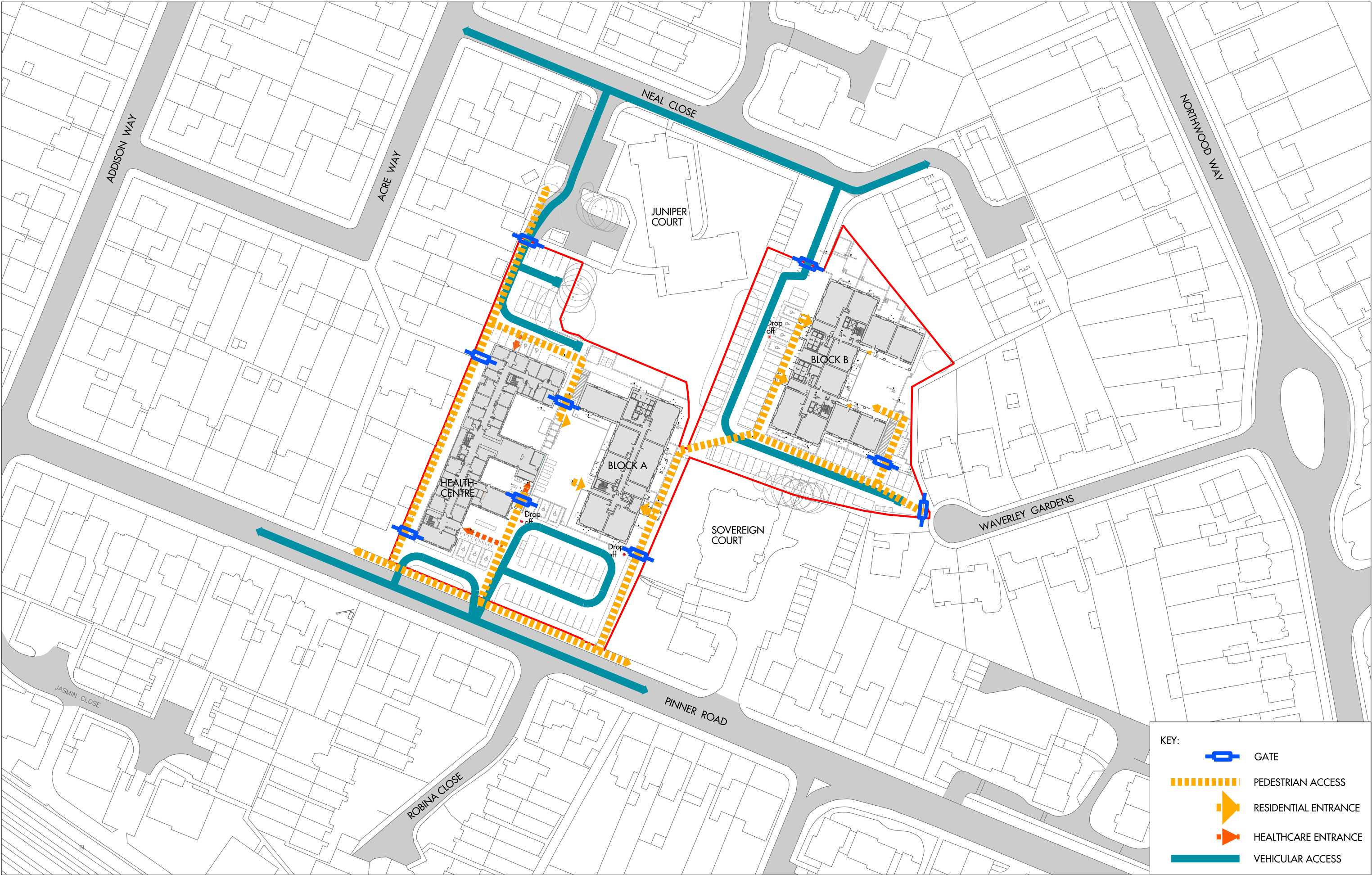
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NHS - NORTHWOOD AND PINNER, LONDON
EXISTING COTTAGE HOSPITAL: ELEVATIONS SHEET 2
PLANNING
17115_05_00_07_022

SCALE 1:100 @A1 1:200@A3

3 PROPOSED



KEY:

- GATE
- PEDESTRIAN ACCESS
- RESIDENTIAL ENTRANCE
- HEALTHCARE ENTRANCE
- VEHICULAR ACCESS

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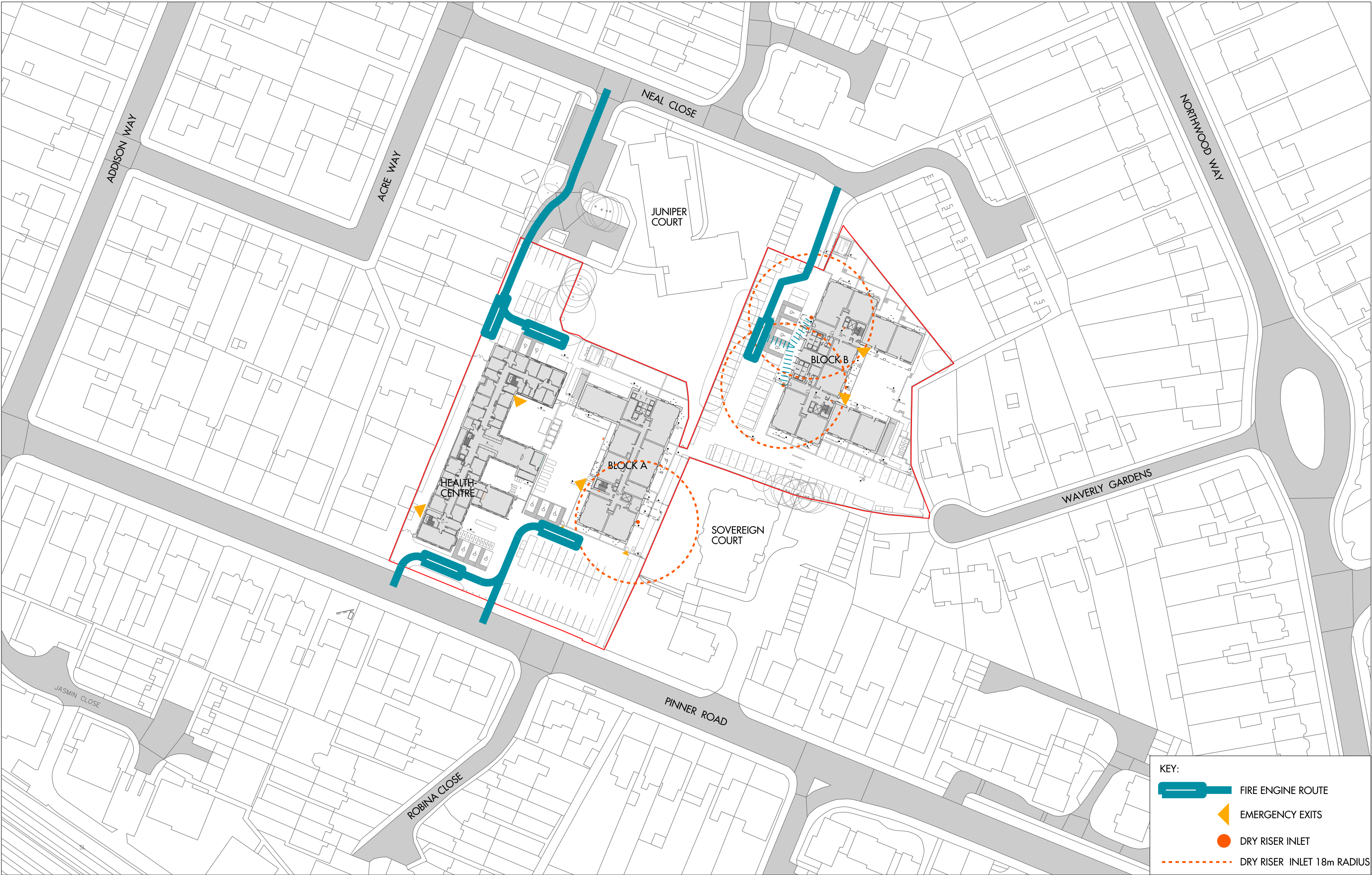
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A&M JOB NO: 17115_05

NHS - NORTHWOOD AND PINNER, LONDON
PROPOSED SITEWIDE ACCESS AND ROUTES
PLANNING
17115_05_00_07_051
SCALE 1:500 @A1 1:1000@A3

P1

Revision



KEY:

FIRE ENGINE ROUTE

EMERGENCY EXITS

DRY RISER INLET

DRY RISER INLET 18m RADIUS

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PROPOSED SITEWIDE EMERGENCY SERVICES ACCESS
PLANNING

17115_05_00_07_052

SCALE 1:500 @A1 1:1000@A3

P1

Revision



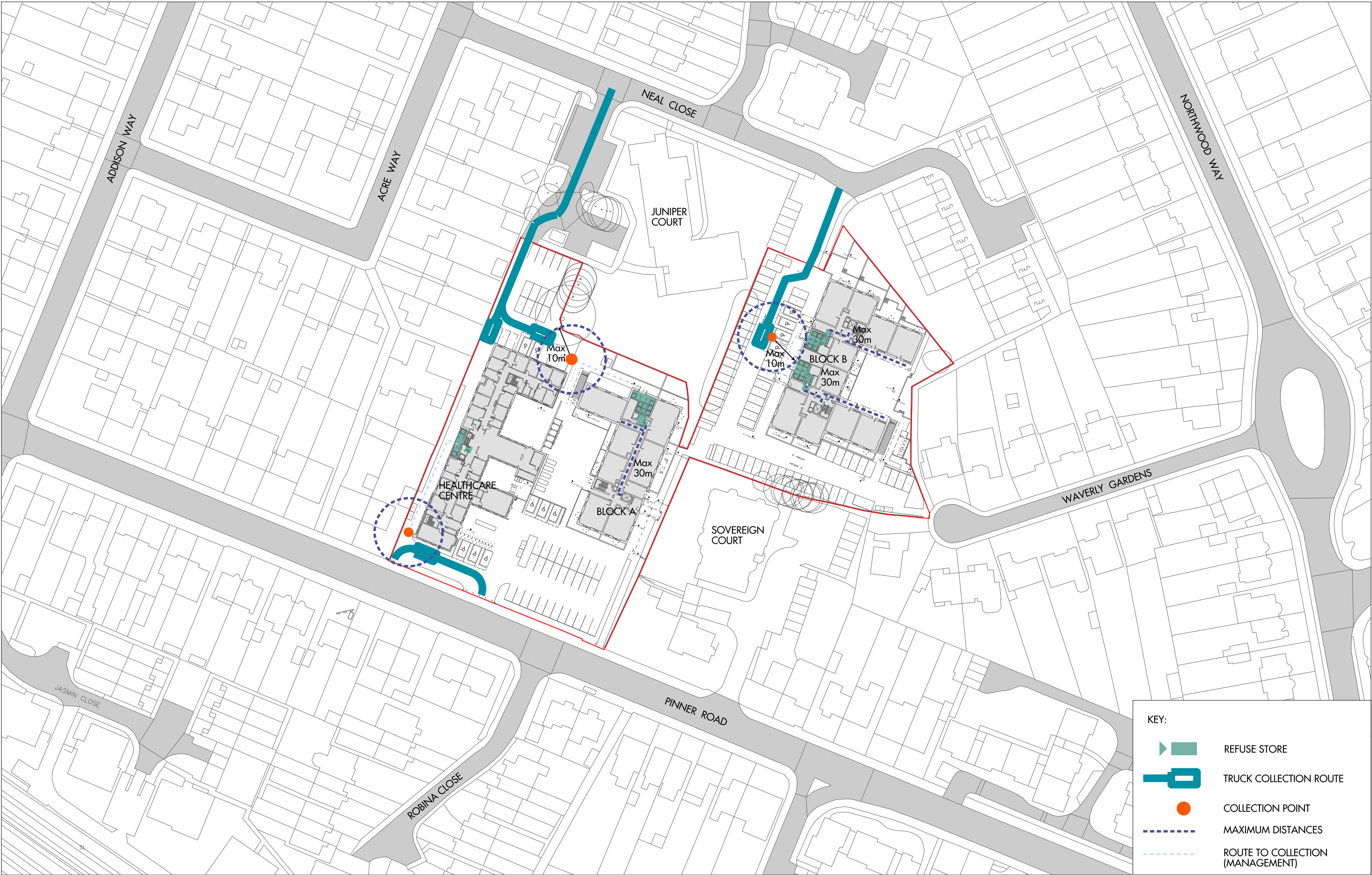
KEY:

- ACCESSIBLE HEALTHCARE PARKING 5
- HEALTHCARE PARKING 47
- ACCESSIBLE RESIDENTIAL PARKING 7
- RESIDENTIAL PARKING 62
- CYCLE PARKING 111 residential
20 Healthcare
- * car park spaces generally available with time restrictions (3hr.)

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KEY:

- REFUSE STORE
- TRUCK COLLECTION ROUTE
- COLLECTION POINT
- MAXIMUM DISTANCES
- ROUTE TO COLLECTION (MANAGEMENT)



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NHS - NORTHWOOD AND PINNER, LONDON
PROPOSED SITEWIDE REFUSE STRATEGY
PLANNING
17115_05_00_07_054
SCALE 1:500 @A1 1:1000@A3

A&M JOB NO: 17115_05

P1
Revision



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A&M JOB NO: 17115 0

NHS - NORTHWOOD AND PINNER, LONDON
PROPOSED LEVEL 00 SITEWIDE PLAN
PLANNING
17115_05_00_07_100
SCALE 1:250 @A1 1:500@A3



REV	DATE	DESCRIPTION	CHK
P1	12.03.2021	ISSUED FOR PLANNING	AO

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NHS - NORTHWOOD AND PINNER, LONDON
PROPOSED ROOF LEVEL SITEWIDE PLAN
PLANNING
17115_05_00_07_104
SCALE 1:250 @A1 1:500@A3

P1
Revision