

West Lothian Civic Centre Howden South Road Howden Livingston EH54 6FF Tel: 01506 280000 (for general enquiries) Email: planning@westlothian.gov.uk

Applications cannot be validated until all the necessary documentation has been submitted and the required fee has been paid.

Thank you for completing this application form:

ONLINE REFERENCE

100340725-002

The online reference is the unique reference for your online form only. The Planning Authority will allocate an Application Number when your form is validated. Please quote this reference if you need to contact the planning Authority about this application.

Site Address Details					
Planning Authority:	West Lothian Council	West Lothian Council			
Full postal address of the	ne site (including postcode where availabl	e):			
Address 1:					
Address 2:					
Address 3:					
Address 4:					
Address 5:					
Town/City/Settlement:					
Post Code:					
Please identify/describe	the location of the site or sites				
Calderwood, East Ca	alder, West Lothian				
Northing	668800	Easting	310200		
Are you an applicant or	Agent Details an agent? * (An agent is an architect, cornt in connection with this application)	nsultant or someone els	e acting ☐ Applicant ☒Agent		

Agent Details					
Please enter Agent detail	s				
Company/Organisation:	Stirling Developments				
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	Stephen	Building Name:	Stirling Developments		
Last Name: *	O'Boyle	Building Number:			
Telephone Number: *	01383 720768	Address 1 (Street): *	Halbeath Interchange Business Park		
Extension Number:		Address 2:	Kingseat Road		
Mobile Number:		Town/City: *	Dunfermline		
Fax Number:		Country: *	United Kingdom		
		Postcode: *	KY11 8RY		
Email Address: *	stephen@stirlingdevelopments.co.uk				
Is the applicant an individ	lual or an organisation/corporate entity? *				
☐ Individual ☑ Organisation/Corporate entity					
Applicant Details					
Please enter Applicant de					
Title:	Other	You must enter a B	uilding Name or Number, or both: *		
Other Title:		Building Name:	Stirling Developments		
First Name: *		Building Number:			
Last Name: *		Address 1 (Street): *	Halbeath Interchange Business Park		
Company/Organisation	Stirling Developments	Address 2:	Kingseat Road		
Telephone Number: *	01383 720768	Town/City: *	Dunfermline		
Extension Number:		Country: *	United Kingdom		
Mobile Number:		Postcode: *	KY11 8RY		
Fax Number:					
Email Address: *	stephen@stirlingdevelopments.co.uk				

Proposa	I/Application Details				
Please provide	the details of the original application(s) below:				
Was the origina	☒ Yes ☐ No				
Applicat	ion Details				
Please select which application(s) the new documentation is related to.					
Application: *	100340725-001, application for Planning Permission, submitted on 17	/12/2020			
Docume	nt Details				
characters)	an explanation as to why the documentation is being attached after the or to plans requested	original application was submitted: * (Max 500			
Checklist – Post Submission Additional Documentation					
Please complete the following checklist to make sure you have provided all the necessary information in support of your application.					
The additional documents have been attached to this submission. *		☒ Yes ☐ No			
Declare	– Post Submission Additional Docume	entation			
I/We the applicant/agent certify that this is a submission of Additional Documentation, and that all the information given in this submission is true to the best of my/the applicants knowledge.					
Declaration Nar	ne: Mr Stephen O'Boyle				
Declaration Dat	e: 20/01/2021				