

Teith House Kerse Road Stirling FK7 7QA Tel: 01786 233660 Fax: 01786 233186 Email: eplanning@stirling.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

100343139-003

| your form is validated. Please quote this reference if you need to contact the planning Authority about this application. |  |                              |                            |
|---|--|------------------------------|----------------------------|
| Extent of Demolition Proposed   |  |                              |                            |
| This proposal is for: *   | ☐ Substantial Demolit  | tion 🗵 Complete Demolition   | n                          |
|   | been started or completed? * ed Yes – Completed                                  |                              |                            |
| Site Address  | Details  |                              |                            |
| Planning Authority:   | Stirling Council   |                              |                            |
| Full postal address of the  | ne site (including postcode where availab  | le):                         |                            |
| 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  |  |                              |                            |
|   |  |                              |                            |
| Northing  | 697359   | Easting                      | 279501                     |
| Applicant or Agent Details  |  |                              |                            |
| •   | an agent? * (An agent is an architect, cont in connection with this application) | nsultant or someone else act | ting<br>☐ Applicant ☒Agent |

| Agent Details   |                              |  |                                    |  |
|---|------------------------------|--|------------------------------------|--|
| Please enter Agent detail   | s                            |  |                                    |  |
| Company/Organisation:   | Yeoman McAllister Architects |  |                                    |  |
| Ref. Number:  |                              | You must enter a B                                   | uilding Name or Number, or both: * |  |
| First Name: *   | Yeoman McAllister            | Building Name:                                       | Waterside Studios                  |  |
| Last Name: *  | Architects                   | Building Number:                                     | 64                                 |  |
| Telephone Number: *   | 0131 346 1145                | Address 1<br>(Street): *                             | Coltbridge Avenue                  |  |
| Extension Number:   |                              | Address 2:   |                                    |  |
| Mobile Number:  |                              | Town/City: *   | Edinburgh                          |  |
| Fax Number:   |                              | Country: *   | United Kingdom                     |  |
|   |                              | Postcode: *  | EH12 6AH                           |  |
| Email Address: *  | info@ym-architects.com       |  |                                    |  |
| Is the applicant an individual or an organisation/corporate entity? *  Individual  Organisation/Corporate entity  Applicant Details |                              |  |                                    |  |
| Please enter Applicant de   |                              |  |                                    |  |
| Title:  | Mr                           | You must enter a Building Name or Number, or both: * |                                    |  |
| Other Title:  |                              | Building Name:                                       | Pavillion 6                        |  |
| First Name: *   | David                        | Building Number:                                     |                                    |  |
| Last Name: *  | McCluskey                    | Address 1<br>(Street): *                             | The Approach                       |  |
| Company/Organisation  | Simply UK                    | Address 2:   | 321 Springhill Parkway             |  |
| Telephone Number: *   | 0141 333 1495                | Town/City: *   | Glasgow                            |  |
| Extension Number:   |                              | Country: *   | United Kingdom                     |  |
| Mobile Number:  |                              | Postcode: *  | G69 6GA                            |  |
| Fax Number:   |                              |  |                                    |  |
| Email Address: *  | david.mccluskey@simplyuk.co  |  |                                    |  |

| Pre-Application Discussion  |                   |
|---|-------------------|
| Have you discussed your proposal with the planning authority? *   | ☐ Yes ☒ No        |
| Supporting Information for Proposed Demolition Work   |                   |
| Why is it proposed to demolish all or part of the building(s) and or structure(s)? * (Max 500 characters)   |                   |
| The Category C Listed Building located at 103 Henderson Street shall be carefully dismantled with key eleme facade being retained and utilised within the new proposed care home facade. The demolition is principally relocation within the new site plan to accommodate the care home proposals. The existing dilapidated proper Henderson Street shall be demolished in its entirety. This property is not listed. | ecessary to allow |
| Please indicate additional information being provided:  |                   |
| Location Plan   |                   |
| Photograph(s) of Elevations   |                   |
| Survey drawings illustrating existing plans and elevations  |                   |
| ☐ Drawings indicating areas of demolition   |                   |
| Historic Records of Building/structure  |                   |
| Evidence of Building's structural condition   |                   |
| ☐ Drawings illustrating proposed development  |                   |
| Supporting Statement  |                   |
| Old photographs   |                   |
| Financial appraisal/justification   |                   |
| ☐ Other   |                   |
| Proposals for the Site after Demolition   |                   |
| Are there any current applications or existing consents or permissions for this site? *   | ☐ Yes ☒ No        |
| Please state the number of current applications or existing consents of permissions: *  |                   |
| Are you submitting an application for Planning Permission or other consent at the same time as this application?  | 🛚 Yes 🗌 No        |
| If Yes, please provide brief details of the proposed development and after use of the site: * (Max 500 characters   | s)                |
| Proposed Care Home comprising 70 bedrooms with ancillary accommodation.   |                   |
| Planning Service Employee/Elected Member Interest   |                   |
| Is the applicant, or the applicant's spouse/partner, either a member of staff within the planning service or an elected member of the planning authority? *   | ☐ Yes ☒ No        |

| Certificates and Notices  |   |                               |  |              |  |
|---|---|-------------------------------|--|--------------|--|
| Certificate and N   | otice   |                               |  |              |  |
| The Planning (Lis   | sted Buildings ar   | nd Conservation Areas) (S     | Scotland) Act 1997                                       |              |  |
| The Town and C  | ountry Planning   | (Listed Building and Build    | lings in Conservation Areas) (Scotland) Regulation       | s 1987       |  |
| One Certificate n   | nust be complete  | ed and submitted along w      | ith this form; either Certificate A, Certificate B or Ce | rtificate C. |  |
| Are you the sole  | Are you the sole owner of ALL the land/building relevant to this proposal? *            |                               |  |              |  |
| Are you able to i   | dentify and give a  | appropriate notice to ALL     | the other owners?  | X Yes □ No   |  |
| Certificat  | e Requir  | ed                            |  |              |  |
| The following La  | nd Ownership Ce   | ertificate is required to con | mplete this section of the proposal:                     |              |  |
| Certificate B   |   |                               |  |              |  |
| Certifica   | ates  |                               |  |              |  |
| The certificate you have selected requires you to distribute copies of the Notice 1 document below to all of the owners that you have provided before you can complete your certificates.   |   |                               |  |              |  |
| Notice 1 is requir  | red   |                               |  |              |  |
| X I understand  | my obligations to   | o provide the above notic     | e before I can complete the certificates. *              |              |  |
| Land Ow   | nership (   | Certificate                   |  |              |  |
| Certificate and Notice The Planning (Listed Buildings and Conservation Areas) (Scotland) act 1997 The Town and Country Planning (Listed Buildings and Buildings in Conservation Areas) (Scotland) Regulations 1987  |   |                               |  |              |  |
| Certificate B   |   |                               |  |              |  |
| I hereby certify th   | nat –   |                               |  |              |  |
| (1) - I have/The Applicant has served notice on every person other than myself/the applicant who, at the beginning of the period of 21 days ending with the date of the accompanying application was owner [note 1] of any part of the land to which the application relates. |   |                               |  |              |  |
| Name:   |   |                               |  |              |  |
| Address:  | James Hay Pe  | ension Trust Ltd, Dunn's I    | House, St Paul's Road, Sailsbury, United Kingdom,        | SP2 7BF      |  |
|   |   |                               |  |              |  |
|   |   |                               |  |              |  |
| Date of Service of  | of Notice: *  | 13/01/2021                    |  |              |  |
| Name:   | Mr Dickson Middleton  |                               |  |              |  |
| Address:  | Bluewater (Glenrothes 2) Limited, 20, Barnton Street, Stirling, United Kingdom, FK8 1NE |                               |  |              |  |
|   | ,   | ,                             | g, g,  |              |  |
| Date of Service of Notice: * 13/01/2021   |   |                               |  |              |  |

| Signed:   | Yeoman McAllister Architects   |  |
|---|--|--|
| On behalf of:   | Simply UK  |  |
| Date:   | 13/01/2021 08:09:49  |  |
| Note 1 – Any perso<br>years remain unexp  | on who, in respect of any part of the land, is the owner or is the lessee under a lease thereof of which not less than 7 pired.  |  |
| Checklist -   | - Application for Conservation Area Consent  |  |
| Failure to submit th  | ne following checklist to make sure you have provided all the necessary information in support of your application. He necessary information may result in your application being deemed invalid. The planning authority will not start plication until it is valid. |  |
| A Location plan and scale and showing   | d/or site plan which identifies the land to which the application relates, drawn to an identified X Yes No the direction of north. This plan should identify clearly the building(s) to be demolished. *   |  |
| Other information: '  | * (at least one must be selected)  |  |
| Design Statem Supporting Statem Condition Surv Feasibility Stur Development A Photographs. Environmental Other. | atement.<br>vey Report.<br>dy.   |  |
| If you have indicat<br>(Max 500 characte  | ted that the information in support of your application is not listed previously, please provide further details.* ers)  |  |
| No Fee is needed v  | with an application for Conservation Area Consent.   |  |
| Declare - Conservation Area Consent   |  |  |
|   | nt certify that this is an application for conservation area consent as described in this form the accompanying additional information.  |  |
| Declaration Name:   | Mr Yeoman McAllister Architects  |  |
| Declaration Date:   | 13/01/2021   |  |