



Viewmount Arduthie Road Stonehaven AB39 2DQ Tel: 01467 534333 Email: [planningonline@aberdeenshire.gov.uk](mailto:planningonline@aberdeenshire.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      100352744-007

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:

Aberdeenshire Council

Full postal address of the site (including postcode where available):

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

791393

Easting

315334

## Applicant or Agent Details

Are you an applicant or an agent? \* (An agent is an architect, consultant or someone else acting on behalf of the applicant in connection with this application)

Applicant  Agent

## Agent Details

Please enter Agent details

Company/Organisation:

Ref. Number:

You must enter a Building Name or Number, or both: \*

First Name: \*

PETER

Building Name:

Klingrahoole

Last Name: \*

MULVEY

Building Number:

Telephone Number: \*

01339741079

Address 1  
(Street): \*

Cluniebank Road

Extension Number:

Address 2:

Mobile Number:

Town/City: \*

Braemar

Fax Number:

Country: \*

Scotland

Postcode: \*

AB35 5YY

Email Address: \*

themulveys@hotmail.com

Is the applicant an individual or an organisation/corporate entity? \*

Individual

Organisation/Corporate entity

## Applicant Details

Please enter Applicant details

Title:

Mr

You must enter a Building Name or Number, or both: \*

Other Title:

Secretary

Building Name:

Gordon House

First Name: \*

John

Building Number:

20

Last Name: \*

Torrance

Address 1  
(Street): \*

Mar Road

Company/Organisation

Braemar Community Council

Address 2:

Telephone Number: \*

Town/City: \*

Braemar

Extension Number:

Country: \*

Aberdeenshire

Mobile Number:

Postcode: \*

AB35 5YL

Fax Number:

Email Address: \*

## Proposal/Application Details

Please provide the details of the original application(s) below:

Was the original application part of this proposal? \*

Yes  No

## Application Details

Please select which application(s) the new documentation is related to.

Application: \*

## Document Details

Please provide an explanation as to why the documentation is being attached after the original application was submitted: \* (Max 500 characters)

The Applicant was wrongly identified as Mr David Geddes in the original Application but he represents the building owners. Mr John Torrance is the secretary of the Community Council and is now listed as the Applicant. Scale on the revised Location Plan is now also amended.

## 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 Documentation

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 Name: Mr PETER MULVEY

Declaration Date: 29/01/2021