

ePlanning Centre Highland Council Glenurquhart Road Inverness IV3 5NX Tel: 01349 886 608 Fax: 01463 702 298 Email: eplanning@highland.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

100381214-002

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:	Highland 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					
Mullens Wood South East of Greenhill Kilcoy Tore					
Northing	852410	Easting	258045		
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  Applicant					

Agent Details						
Please enter Agent details						
Company/Organisation:	MRH DESIGN					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Mark	Building Name:	The Studio			
Last Name: *	Hornby	Building Number:	9			
Telephone Number: *	01463 794410	Address 1 (Street): *	Heights of Woodside			
Extension Number:		Address 2:	Westhill			
Mobile Number:		Town/City: *	Inverness			
Fax Number:		Country: *	Scotland			
		Postcode: *	IV2 5TH			
Email Address: *	info@mrhdesign.co.uk					
Is the applicant an individual or an organisation/corporate entity? *  Individual Organisation/Corporate entity						
Applicant Det						
Please enter Applicant de	Mr					
Title:	IVII	You must enter a Building Name or Number, or both: *				
Other Title:		Building Name:				
First Name: *	John	Building Number:	14			
Last Name: *	Potter	Address 1 (Street): *	Manse Road			
Company/Organisation		Address 2:				
Telephone Number: *		Town/City: *	Inverness			
Extension Number:		Country: *	Scotland			
Mobile Number:		Postcode: *	iv2 7sr			
Fax Number:						
Email Address: *						

Proposa	l/Application Details				
Please provide	the details of the original application(s) below:				
Was the original	al application part of this proposal? *	⊠ Yes □ No			
Applicat	ion Details				
Please select which application(s) the new documentation is related to.					
Application: *	100381214-001, application for Prior Notification and Approval, submitted on 18/03	3/2021			
Docume	nt Details				
Please provide an explanation as to why the documentation is being attached after the original application was submitted: * (Max 500 characters)					
additional info request					
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 Nan	me: Mr Mark Hornby				
Declaration Date	re: 30/03/2021				