

Planning & Building Standards 231 George Street GLASGOW G1 1RX Tel: 0141 287 8555 Email: onlineplanning@glasgow.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

100383938-002

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. F	Please quote this reference if you need	d to contact the planning Aut	nority about this application.	
Site Address	Details			
Planning Authority:	Glasgow City Council			
Full postal address of the	ne site (including postcode where avai	lable):		
Address 1:	127 ESSEX DRIVE			
Address 2:				
Address 3:				
Address 4:				
Address 5:				
Town/City/Settlement:	GLASGOW			
Post Code:	G14 9PD			
Please identify/describe	the location of the site or sites			
Northing	667585	Easting	253974	
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:	BATT Architecture Ltd.				
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	John	Building Name:			
Last Name: *	Wyvar	Building Number:	74		
Telephone Number: *	07718632452	Address 1 (Street): *	Townhead		
Extension Number:		Address 2:	Unit 8, Kirkintilloch Business Centre		
Mobile Number:	07718632452	Town/City: *	Kirkintilloch		
Fax Number:		Country: *	Scotland		
		Postcode: *	G66 1NZ		
Email Address: *	john@batt-architecture.co.uk				
Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity					
Applicant Det	ails				
Please enter Applicant de	etails				
Title:	Mr	You must enter a Building Name or Number, or both: *			
Other Title:		Building Name:			
First Name: *	David	Building Number:	127		
Last Name: *	Dunlop	Address 1 (Street): *	Essex Drive		
Company/Organisation		Address 2:			
Telephone Number: *		Town/City: *	Glasgow		
Extension Number:		Country: *	Scotland		
Mobile Number:	07813891404	Postcode: *	G149PD		
Fax Number:					
Email Address: *	dunlop@hotmail.co.uk				

Proposa	I/Application Details				
Please provide	the details of the original application(s) below:				
Was the origina	⊠ Yes □ No				
	ion Details				
Please select which application(s) the new documentation is related to.					
Application: *	100383938-001, application for Householder Application, submitted on 23.	/03/2021			
Docume	nt Details				
characters)	an explanation as to why the documentation is being attached after the original per comments.	nal 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. *					
Declare	 Post Submission Additional Document 	ation			
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	me: Mr Alexander McCormick				
Declaration Dat	e: 29/04/2021				