APPLICATION FOR THE MODIFICATION OR DISCHARGE OF PLANNING OBLIGATIONS

Town and Country Planning (Scotland) Act 1997 (as amended)
The Town and Country Planning (Modification and Discharge of Planning Obligations) (Scotland)
Regulations 2010

1. Applicant's Details		2. Agent's Details	(if any)	
Title Forename Surneme	Mr James Walls	Ref No. Foresiatne Sumame		
Company Name Building No,/Name Address Line 1 Address Line 2 Town/City	CHRESIDE COTTAGE CLACKMANINAN	Company Name Building No./Name Address Line 1 Address Line 2 Town/City		
Postcode Telephone Mobile Fax Email	FK10 3PZ	Postcode Telephone Mobile Fax Email		
3. Address or Location of the land to which the Planning Obligation relates (please include postcode) Gartiove, Clackmannan, FK10 3PZ				
NB. If you do not have a full site adoress please identify the location of the site(s) in your accompanying documentation.				
4. Type of Application What is the application for? Please select one of the following:				
Modification of the Planning Obligation Discharge of the Planning Obligation				
Please provide a reference number of the planning consent and date when permission was granted: Reference No: 18/00016/FULL Date: 19/11/18				

5. Please provide a brief description of the land to which the Planning Obligation	the development and the relationship of the A	opplicant to			
Erection of 1 no. House and Erection	of Hatchery Building, Owner				
6. Details of all signatories to the Planni					
Name	Acidress				
Tames walls	CAMESIAL GAMAGE, ALLON, FKIO31	°2			
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7. Details of any other interested parties e.g. Owner of the Land to which the Planning Obligation relates or any other person whom the Planning Obligation is enforceable.					
Name	Address				
8. Outline below which parts of the Planning Obligation you wish modified or discharged and what changes you wish made, giving full reasons why the application is being made (a separate sheet of paper may be used to accompany).					
SC24. SC25 E A. 4-	g, Section 8, Planning Assessment SC12, SC.				
SEE ATTACHED OCCUPANCY RESTRICTION	RICTIONS AND RURAL HOUSING, CTUES)G77isH			
DECLARATION/CHECKLIST		··-·			
Please check the following before submitting yo	pur application:				
2	50 or 1:2500 location plan of the site anning Coligation				
I, the applicant / agent horsby certify that the information given by me in this form is true and accurate to the best of my knowledge. I certify that I have provided the names and addresses of others who are signatories to the planning obligation as well as those of any other interested parties.					
Signature: Name: SAMES WALLS Date: 9 7 8!					
Any personal data that you have seen asked to	provide on this from will be held and processed in acco	rdance with			