

Planning Services 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 100460259-003

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.

your form is validated. Frease quote this reference if you need to contact the planning Authority about this application.						
Site Address	Details					
Planning Authority:	Glasgow City Council					
Full postal address of the	ne site (including postcode where availab	le):				
Address 1:	FLAT 1/1					
Address 2:	14 CLEVEDEN CRESCENT					
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	GLASGOW					
Post Code:	G12 0PB					
Please identify/describe the location of the site or sites						
Northing	668167	Easting	255876			
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:	Ingram Architecture & Design					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Stephen	Building Name:				
Last Name: *	Govan	Building Number:	227			
Telephone Number: *		Address 1 (Street): *	Ingram Street			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Glasgow			
Fax Number:		Country: *	UK			
		Postcode: *	G1 1DA			
Email Address: *						
Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity						
Applicant Det	tails					
Please enter Applicant de	etails					
Title:	Mr	You must enter a Building Name or Number, or both: *				
Other Title:		Building Name:	care of Ingram Architecture and			
First Name: *	А	Building Number:	227			
Last Name: *	Singh	Address 1 (Street): *	Ingram Street			
Company/Organisation		Address 2:				
Telephone Number: *		Town/City: *	Glasgow			
Extension Number:		Country: *	UK			
Mobile Number:		Postcode: *	G1 1DA			
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? *					
	ion Details				
	hich application(s) the new documentation is related to.				
Application: *	100460259-001, application for Householder Application, submitted o	n 22/08/2021			
Docume	nt Details				
Please provide an explanation as to why the documentation is being attached after the original application was submitted: * (Max 500 characters)					
Existing and proposed elevation views and revised drawings.					
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 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 Nar	me: Mr Stephen Govan				
Declaration Dat	te: 15/09/2021				