



Fleming House 2 Tryst Road Cumbernauld G67 1JW Tel: 01236 632500 Fax: 01698 302115 Email: esPlanning@northlan.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 100492421-002

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:

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

Easting

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:	OSD Design Solutions Ltd		
Ref. Number:		You must enter a Building Name or Number, or both: *	
First Name: *	David	Building Name:	International House
Last Name: *	Alcheson	Building Number:	
Telephone Number: *	01698404840	Address 1 (Street): *	Suite 1/J3
Extension Number:		Address 2:	Stanley Boulevard, Blantyre,
Mobile Number:		Town/City: *	GLASGOW
Fax Number:		Country: *	United Kingdom
		Postcode: *	G72 0BN
Email Address: *	david@osddesign.co.uk		

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:		Building Name:	Blackridge Farm
First Name: *	Chris	Building Number:	
Last Name: *	Smith	Address 1 (Street): *	Bothwellshields Road
Company/Organisation:		Address 2:	Newhouse
Telephone Number: *		Town/City: *	Motherwell
Extension Number:		Country: *	Scotland
Mobile Number:		Postcode: *	ML1 5SX
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: * 100492421-001, application for Householder Application, submitted on 26/10/2021

Document Details

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

Scale bars added to 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. *

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 David Aitcheson

Declaration Date: 28/10/2021