



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 100502334-002

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: North Lanarkshire Council

Full postal address of the site (including postcode where available):

Address 1: 21 BRAMLEY DRIVE

Address 2:

Address 3:

Address 4:

Address 5:

Town/City/Settlement: BELLSHILL

Post Code: ML4 3GA

Please identify/describe the location of the site or sites

Northing

661652

Easting

273144

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:			
Ref. Number:		You must enter a Building Name or Number, or both: *	
First Name: *	David	Building Name:	
Last Name: *	Gibson	Building Number:	4
Telephone Number: *	07727034444	Address 1 (Street): *	Camellia Drive
Extension Number:		Address 2:	
Mobile Number:		Town/City: *	Wishaw
Fax Number:		Country: *	Scotland
		Postcode: *	ML2 0FF
Email Address: *	davidgibson.nn@gmail.com		

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:	
First Name: *	John	Building Number:	21
Last Name: *	McGhee	Address 1 (Street): *	Bramley Drive
Company/Organisation		Address 2:	
Telephone Number: *		Town/City: *	Bellshill
Extension Number:		Country: *	Scotland
Mobile Number:		Postcode: *	ML4 3GA
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: * 100502334-001, application for Certificate of Lawfulness - Existing Use, submitted on 18/11/2021

Document Details

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

Additional information being submitted in relation to ufm2 sent from Aileen Davidson on 23rd November 2021.

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 Gibson

Declaration Date: 27/11/2021