

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 100557640-003

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. I lease quote this reference if you need to contact the planning Authority about this application.						
Site Address Details						
Planning Authority:	Glasgow City Council	Glasgow City Council				
Full postal address of the	ne site (including postcode where availab	le):				
Address 1:	203 SAUGHS DRIVE					
Address 2:						
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	GLASGOW					
Post Code:	G33 1BN					
Please identify/describe the location of the site or sites						
Northing	668759	Easting	263952			
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:						
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	JAMES	Building Name:				
Last Name: *	DEVENAY	Building Number:	15			
Telephone Number: *		Address 1 (Street): *	15 Fordbank Drive			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Johnstone			
Fax Number:		Country: *	UK			
		Postcode: *	PA10 2NE			
Email Address: *						
ls the applicant an indiv	*					
🗵 Individual 🗌 Orga	nisation/Corporate entity					
Applicant Det	ails					
Please enter Applicant de	tails					
Title:	Mr	You must enter a Building Name or Number, or both: *				
Other Title:		Building Name:				
First Name: *	PAT	Building Number:	203			
Last Name: *	LOGAN	Address 1 (Street): *	SAUGHS DRIVE			
Company/Organisation		Address 2:	SAUGHS DRIVE			
Telephone Number: *		Town/City: *	GLASOGW			
Extension Number:		Country: *	United Kingdom			
Mobile Number:		Postcode: *	G33 1BN			
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	mentation is related to.				
Application: *	. , , ,		cuments, submitted on 27/04/2022			
Docume	nt Details		·			
Please provide an explanation as to why the documentation is being attached after the original application was submitted: * (Max 500 characters)						
ROOF PLANS ADDED. REVISED SITE PLANS						
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						
//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	ne: Mr JAMES DEVEN	NAY				
Declaration Dat	9: 05/05/2022					