

Fife House North Street Glenrothes KY7 5LT Email: development.central@fife.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 100649731-004

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:	Fife Council					
Full postal address of the	he site (including postcode where available	le):				
Address 1:	79 HOPE STREET					
Address 2:						
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	INVERKEITHING					
Post Code:	KY11 1LN					
Please identify/describe the location of the site or sites						
Northing	682472	Easting	312662			
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) \leq Applicant T Agent						
on behalf of the applicant in connection with this application) \leq Applicant \uparrow Agent						

Agent Details					
Please enter Agent details					
Company/Organisation: Alastair Barclay, Quantity Surveying & Building Consultant					
Ref. Number:		You must enter a Building Name or Number, or both: *			
First Name: *	Alastair	Building Name:	Smiddy House		
Last Name: *	Barclay	Building Number:			
Telephone Number: *	07792 751 924	Address 1 (Street): *	Shiresmill		
Extension Number:		Address 2:	By Blairhall		
Mobile Number:		Town/City: *	Dunfermline		
Fax Number:		Country: *	Scotland		
		Postcode: *	KY12 8ER		
Email Address: *	alastair2030@gmail.com				
Is the applicant an individual or an organisation/corporate entity? * $ T \text{Individual} \leq \text{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: *	Orlando	Building Number:	79		
Last Name: *	Padilla	Address 1 (Street): *	Hope Street		
Company/Organisation		Address 2:	Inverkeithing		
Telephone Number: *		Town/City: *	Fife		
Extension Number:		Country: *	United Kingdom		
Mobile Number:		Postcode: *	KY11 1LN		
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? *

T Yes \leq No

Application Details

Please select which application(s) the new documentation is related to.

Application: *

100649731-002, application for Householder Application, submitted on 26/10/2023

Document Details

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

Scale bar added to the location plan and a supporting statement has been added to the application.

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. *

T Yes \leq 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 Alastair Barclay

Declaration Date: 31/10/2023