

Application to vary planning permission

Town and Country Planning (Scotland) Act 1997 Section 64 - application to vary planning permission

Contacts

Returning the form: Please note that all forms should be returned to:

Community and Enterprise Resources, Planning and Economic Development,

Council Offices, Montrose House,

154 Montrose Crescent,

Hamilton, ML3 6LB.

(Offices are open from 8.45am till 4.45pm Monday to Thursday

and from 8.45am till 4.15pm on Fridays)

Phone: 0303 123 1015

(lines area open between 8am and 6pm Monday to Friday)

Email: planning@southlanarkshire.gov.uk

Application to vary permission

i. Haille a	nu audress or app	iicaniųs)				
	Surname Other name(s) Address	WESTMORLAND FAMILY RHEGED, REDHILLS, CUMBRIA				
	Postcode Daytime phone: Email	CA11 0DQ				
2. Name a	nd address of age	nt (if any)				
	Surname Other name(s) Address	AXIOM DESIGNS 65 HIGH STREET SANQUHAR				
	Postcode Daytime phone: Email	DG4 6DT 07900 676312 axiomdesigns@aol.com				
3. Details	of planning permi	ssion to be varied				
(a) Loc	ation of proposal					
(b) Pro	posed development					
	ERECTION OF EXTENSION TO AMENITY BULLDING.					
(c) Reference no: of planning permission						
	7/22/1732					
(d) Dat	e of permission					
	23 FEBR	WBRY 2023				
(e) Has	work started?	Building warrant reference number (if applicable)				
	Yes No No					

	(f) Hav	ve any other var	iations been sou	ught? (give details)				
		NO.						
	(g) Nar	g) Name of applicant to whom permission was issued (grantee)*						
		(NESTMORIAND FAMILY).						
		(NESTWORD TRAVES).						
	*Note: If different from applicant named in section 1, a letter must be lodged by the grantee confirming that permission has been given for the making of this application.							
4.	. Details of variation							
	State which aspects of the development you wish to alter.							
		ALTERAT	row to r	DOF FORM TO				
5. Plans lodged								
	Please I			ith this application.				
	CUE/A1/107C							
	CLE/A1/107 C CLE/A1/108 B CLE/A1/109 C CLE/A1/110 B							
	aE/A1/109C							
		CUE/AI/110 B						
	Signature of							
	applicant/ agent* AXISM DESIGN SERVICE							
Date 31/10/23.								
	For official use only							
		Date received		Application no.				
		Variation no.			-			