



Newtown St Boswells Melrose TD6 0SA Tel: Payments/General Enquiries 01835 825586 Email: regadmin@scotborders.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 100606710-003

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.

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:	CSY Architects		
Ref. Number:		You must enter a Building Name or Number, or both: *	
First Name: *	CSY	Building Name:	
Last Name: *	Architects	Building Number:	9
Telephone Number: *	0131 663 9735	Address 1 (Street): *	West Street
Extension Number:		Address 2:	
Mobile Number:		Town/City: *	Berwick-upon-Tweed
Fax Number:		Country: *	United Kingdom
		Postcode: *	TD15 1AS
Email Address: *	alan.bain@csyarchitects.com		

Is the applicant an individual or an organisation/corporate entity? *

Individual Organisation/Corporate entity

Applicant Details

Please enter Applicant details

Title:	Other	You must enter a Building Name or Number, or both: *	
Other Title:	Mr & Mrs	Building Name:	The Smithy
First Name: *	Herman	Building Number:	
Last Name: *	Duff	Address 1 (Street): *	The Smithy
Company/Organisation		Address 2:	Allanton
Telephone Number: *		Town/City: *	Duns
Extension Number:		Country: *	Scottish Borders
Mobile Number:		Postcode: *	TD11 3LA
Fax Number:			
Email Address: *	casenergy@btconnect.com		

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: *

100606710-002, application for Householder Application, submitted on 29/11/2023

Document Details

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

Additional plans to support elevations

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: Ms CSY Architects

Declaration Date: 29/11/2023