

Marischal College Planning & Sustainable Development Business Hub 4, Ground Floor North Broad Street Aberdeen AB10 1AB Tel: 01224 523 470 Fax: 01224 636 181 Email: pi@aberdeencity.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 100657229-002

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	s Details					
Planning Authority:	Aberdeen City Council					
Full postal address of the	ne site (including postcode where availabl	e):				
Address 1:	56 DUBFORD RISE					
Address 2:						
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	ABERDEEN					
Post Code:	AB23 8GL					
Please identify/describe	the location of the site or sites					
Northing	811978	Easting	393883			
Applicant or	Agent Details					
Are you an applicant or	an agent? * (An agent is an architect, cor	nsultant or someone e	=			
on behalf of the applicant in connection with this application) $\leq$ Applicant $T$ Agent						

Agent Details						
Please enter Agent details						
Company/Organisation:	MRT Architects					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Euan	Building Name:				
Last Name: *	Beggs	Building Number:	21			
Telephone Number: *	01224639295	Address 1 (Street): *	Waverley Place			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Aberdeen			
Fax Number:		Country: *	Scotland			
		Postcode: *	AB10 1XH			
Email Address: *	euan.beggs@mrtarchitects.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:	Mrs	You must enter a Building Name or Number, or both: *				
Other Title:		Building Name:				
First Name: *	Nickie	Building Number:	56			
Last Name: *	Scorgie	Address 1 (Street): *	Dubford Rise			
Company/Organisation		Address 2:				
Telephone Number: *		Town/City: *	Aberdeen			
Extension Number:		Country: *	United Kingdom			
Mobile Number:		Postcode: *	AB238GL			
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: \*

100657229-001, application for Householder Application, submitted on 12/01/2024

#### **Document Details**

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

Amended location plan as requested by technical team

# **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 Euan Beggs

Declaration Date: 12/01/2024