

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 100658663-003

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:	Fife Council				
Full postal address of the site (including postcode where available):					
Address 1:	STRATHKINNESS PARISH CHUR	CH			
Address 2:	CHURCH ROAD				
Address 3:	STRATHKINNESS				
Address 4:					
Address 5:					
Town/City/Settlement:	ST ANDREWS				
Post Code:	KY16 9XR				
Please identify/describe the location of the site or sites					
Northing	716282	Easting	346026		
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)					

Agent Details						
Please enter Agent details						
Company/Organisation:	JON FRULLANI ARCHITECT					
Ref. Number:		You must enter a B	You must enter a Building Name or Number, or both: *			
First Name: *	JON	Building Name:				
Last Name: *	FRULLANI	Building Number:	140			
Telephone Number: *	01382224828	Address 1 (Street): *	Perth Road			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Dundee			
Fax Number:		Country: *	United Kingdom			
		Postcode: *	DD1 4JW			
Email Address: *	jon@jfarchitect.co.uk					
Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity						
Applicant Det Please enter Applicant de						
Title:	rialis .	You must enter a B	uilding Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *		Building Number:	29			
Last Name: *		Address 1 (Street): *	commercial street			
Company/Organisation	Remmus Developments Ltd	Address 2:				
Telephone Number: *		Town/City: *	Dundee			
Extension Number:		Country: *	scotland			
Mobile Number:		Postcode: *	DD1 3DG			
Fax Number:						
Email Address: *	jon@jfarchitect.co.uk					

Proposal/Application Details					
Please provide	the details of the original application(s) below:				
Was the origina	I application part of this proposal? *	⊠ Yes □ No			
Applicat	ion Details				
Please select which application(s) the new documentation is related to.					
Application: *	100658663-001, application for Planning Permission, submitted on 25/0	01/2024			
Docume	nt Details				
characters)	an explanation as to why the documentation is being attached after the or	iginal application was submitted: * (Max 500			
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 Nar	ne: Mr JON FRULLANI				
Declaration Dat	e: 01/02/2024				