

100646500-004

ONLINE REFERENCE

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		7		
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					
Ajax Way, Methil, Leven KY8 3RS					
Northing	699931	Easting	337925		
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:	Austin-Smith:Lord					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Omkar	Building Name:	Allan House			
Last Name: *	Deshmankar	Building Number:				
Telephone Number: *	0141 223 8500	Address 1 (Street): *	25 Bothwell Street			
Extension Number:		Address 2:				
Mobile Number:		Town/City: *	Glasgow			
Fax Number:		Country: *	United Kingdom			
		Postcode: *	G2 6NL			
Email Address: *	omkar.deshmankar@austinsmithlord.com					
Is the applicant an individual or an organisation/corporate entity? *  Individual Organisation/Corporate entity						
Applicant Det						
Please enter Applicant de						
Title:	Mr	You must enter a Building Name or Number, or both: *				
Other Title:		Building Name:	5th Floor Burdett House			
First Name: *	Maurice	Building Number:				
Last Name: *	Citron	Address 1 (Street): *	15-16 Buckingham Street			
Company/Organisation	Primary Health Properties Investments	Address 2:				
Telephone Number: *	0203 8333 385	Town/City: *	London			
Extension Number:		Country: *	United Kingdom			
Mobile Number:		Postcode: *	WC2N 6DU			
Fax Number:						
Email Address: *	Maurice.Citron@phpgroup.co.uk					

Proposa	al/Application Details				
Please provide	the details of the original application(s) below:				
Was the original application part of this proposal? *					
Applicat	tion Details				
Please select which application(s) the new documentation is related to.					
Application: *	100646500-001, application for Planning Permission, submitted on	16/10/2023			
Docume	ent Details				
Please provide an explanation as to why the documentation is being attached after the original application was submitted: * (Max 500 characters)					
	ents and drawings uploaded are requested by the planning authority for requested is underway and will be uploaded when we receive the asse	• • • • • • • • • • • • • • • • • • • •			
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. *					
Declare	- Post Submission Additional Docum	entation			
	ant/agent certify that this is a submission of Additional Documentation, rue to the best of my/the applicants knowledge.	and that all the information given in this			
Declaration Na	me: Mr Omkar Deshmankar				
Declaration Da	te: 12/01/2024				