

Fairfield House 8 Lothian Road Dalkeith EH22 3ZN Tel: 0131 271 3302 Fax: 0131 271 3537 Email: planning-applications@midlothian.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 100665644-002

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.

your form is validated. I	Please quote this reference if you need to	contact the planning	Authority about this application.			
Site Address	s Details					
Planning Authority:	Midlothian Council					
Full postal address of the	ne site (including postcode where available	le):				
Address 1:	187 MAIN STREET					
Address 2:						
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	PATHHEAD					
Post Code:	EH37 5SQ					
Please identify/describe the location of the site or sites						
Northing	663860	Easting	339802			
Applicant and	Amont Dataila					
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) \leq Applicant T Agent						

Agent Details							
Please enter Agent details							
Company/Organisation: R2 Draughting Services Ltd							
Ref. Number:		You must enter a Building Name or Number, or both: *					
First Name: *	Ross	Building Name:					
Last Name: *	Mullen	Building Number:	73				
Telephone Number: *	07776392961	Address 1 (Street): *	Moffat Walk				
Extension Number:		Address 2:					
Mobile Number:		Town/City: *	Tranent				
Fax Number:		Country: *	Scotland				
		Postcode: *	EH33 2QN				
Email Address: *	r2draughting@outlook.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: *	Sana	Building Number:	187				
Last Name: *	Malik	Address 1 (Street): *	Main Street				
Company/Organisation		Address 2:					
Telephone Number: *		Town/City: *	Pathhead				
Extension Number:		Country: *	Scotland				
Mobile Number:		Postcode: *	EH37 5SQ				
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: *

100665644-001, application for Householder Application, submitted on 21/03/2024

Document Details

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

Amended drawing with rear elevation to existing garage added

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 Ross Mullen

Declaration Date: 22/03/2024