



Planning Services 231 George Street GLASGOW G1 1RX Tel: 0141 287 8555 Email: onlineplanning@glasgow.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 100662358-006

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:

Glasgow City Council

Full postal address of the site (including postcode where available):

Address 1:

SCOTTISH OPERA

Address 2:

40 EDINGTON STREET

Address 3:

Address 4:

Address 5:

Town/City/Settlement:

GLASGOW

Post Code:

G4 9RD

Please identify/describe the location of the site or sites

Northing

666695

Easting

258747

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:	<input type="text" value="Ryden"/>		
Ref. Number:	<input type="text"/>	You must enter a Building Name or Number, or both: *	
First Name: *	<input type="text" value="Shahid"/>	Building Name:	<input type="text" value="Onyx"/>
Last Name: *	<input type="text" value="Ali"/>	Building Number:	<input type="text" value="215"/>
Telephone Number: *	<input type="text"/>	Address 1 (Street): *	<input type="text" value="215 Bothwell Street"/>
Extension Number:	<input type="text"/>	Address 2:	<input type="text"/>
Mobile Number:	<input type="text"/>	Town/City: *	<input type="text" value="Glasgow"/>
Fax Number:	<input type="text"/>	Country: *	<input type="text" value="Scotland"/>
		Postcode: *	<input type="text" value="G2 7EZ"/>
Email Address: *	<input type="text"/>		
Is the applicant an individual or an organisation/corporate entity? *			
<input type="checkbox"/> Individual <input checked="" type="checkbox"/> Organisation/Corporate entity			

Applicant Details

Please enter Applicant details

Title:	<input type="text" value="Mr"/>	You must enter a Building Name or Number, or both: *	
Other Title:	<input type="text"/>	Building Name:	<input type="text"/>
First Name: *	<input type="text" value="Alex"/>	Building Number:	<input type="text" value="39"/>
Last Name: *	<input type="text" value="Reedijk"/>	Address 1 (Street): *	<input type="text" value="Elmbank Crescent"/>
Company/Organisation	<input type="text" value="Scottish Opera Ltd"/>	Address 2:	<input type="text"/>
Telephone Number: *	<input type="text"/>	Town/City: *	<input type="text" value="Glasgow"/>
Extension Number:	<input type="text"/>	Country: *	<input type="text" value="Scotland"/>
Mobile Number:	<input type="text"/>	Postcode: *	<input type="text" value="G2 4PT"/>
Fax Number:	<input type="text"/>		
Email Address: *	<input type="text"/>		

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: * 100662358-001, application for Planning Permission, submitted on 29/02/2024

Document Details

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

The previous SI report was an interim report. Please find attached a final report with all the test information, such as gas monitoring and hazard waste screening had been completed and incorporated into the report. This final report also expands on the investigations undertaken, the testing required, the discussion of the results, provides more test results data and provides conclusions and recommendations. We should note that the conclusions are the same as the interim report.

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: Mr Shahid Ali

Declaration Date: 27/03/2024