

ePlanning Centre Highland Council Glenurquhart Road Inverness IV3 5NX Tel: 01349 886 608 Fax: 01463 702 298 Email: eplanning@highland.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 100243937-008

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. Thease quote this reference if you need to contact the planning Admonty about this application. | | | | | | |
|---|---------------------------------------|----------|--------|--|--|--|
| Site Address | Details | | | | | |
| Planning Authority: | Highland Council | | | | | |
| Full postal address of th | e site (including postcode where avai | ilable): | | | | |
| Address 1: | CANNA HOUSE | | | | | |
| Address 2: | | | | | | |
| Address 3: | | | | | | |
| Address 4: | | | | | | |
| Address 5: | | | | | | |
| Town/City/Settlement: | ISLE OF CANNA | | | | | |
| Post Code: | PH44 4RS | | | | | |
| Please identify/describe the location of the site or sites | | | | | | |
| | | | | | | |
| Northing | 805513 | Easting | 127449 | | | |
| | | | | | | |
| 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 Applicant | | | | | | |

| Agent Details | | | | | | |
|---|---------------------------------|--|----------------|--|--|--|
| Please enter Agent detail | S | | | | | |
| Company/Organisation: | LDN Architects LLP | | | | | |
| Ref. Number: | | You must enter a Building Name or Number, or both: * | | | | |
| First Name: * | LDN | Building Name: | The Treehouse | | | |
| Last Name: * | Architects LLP | Building Number: | | | | |
| Telephone Number: * | 01463423380 | Address 1 (Street): * | Carsegate Road | | | |
| Extension Number: | | Address 2: | | | | |
| Mobile Number: | | Town/City: * | Inverness | | | |
| Fax Number: | | Country: * | Scotland | | | |
| | | Postcode: * | IV3 8EX | | | |
| Email Address: * | architects@ldn.co.uk | | | | | |
| Is the applicant an individual or an organisation/corporate entity? * Individual Organisation/Corporate entity Applicant Details | | | | | | |
| Please enter Applicant de | | | | | | |
| Title: | Other | You must enter a Building Name or Number, or both: * | | | | |
| Other Title: | | Building Name: | Hermiston Quay | | | |
| First Name: * | | Building Number: | 5 | | | |
| Last Name: * | | Address 1 (Street): * | Cultins Road | | | |
| Company/Organisation | The National Trust for Scotland | Address 2: | | | | |
| Telephone Number: * | | Town/City: * | Edinburgh | | | |
| Extension Number: | | Country: * | UK | | | |
| Mobile Number: | | Postcode: * | EH11 4DF | | | |
| Fax Number: | | | | | | |
| Email Address: * | i.fraser@ldn.co.uk | | | | | |

| Proposal/Application Details | | | | | | |
|--|---|----------------------------|--|--|--|--|
| Please provide | the details of the original application(s) below: | | | | | |
| Was the origina | | | | | | |
| Applicat | ion Details | | | | | |
| Please select which application(s) the new documentation is related to. | | | | | | |
| Application: * | 100243937-007, application for Post Submission Additional Documents | s, submitted on 03/05/2022 | | | | |
| Document Details | | | | | | |
| Please provide an explanation as to why the documentation is being attached after the original application was submitted: * (Max 500 characters) | | | | | | |
| Letter Notifying Invalid Application received dated 09 April 2024. New Planning Reference supplied 24/01120/FUL Letter request revised Location and Site Plans that show connection between site and adjacent road. NOTE THAT THE FORM REFERENCES 100243937-007 SUBMITTED 03/05/2022 WHEN IT SHOULD BE 100665930-001 SUBMITTED 25.03.2024? | | | | | | |
| 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 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 | me: LDN LDN Architects LLP | | | | | |
| Declaration Dat | re: 21/04/2024 | | | | | |