

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 100667002-002

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.

Site Address Details

Planning Authority:	Highland Council				
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					
Port Mor, Isle of Muck					
Northing	779469	Easting	142266		
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:	Rural Design Ltd.				
Ref. Number:		You must enter a Bu	uilding Name or Number, or both: *		
First Name: *	Rural	Building Name:	Rural Design		
Last Name: *	Design	Building Number:			
Telephone Number: *	01478613379	Address 1 (Street): *	Mill Studio		
Extension Number:		Address 2:	Struan Road		
Mobile Number:		Town/City: *	Portree		
Fax Number:		Country: *	UK		
		Postcode: *	IV51 9EG		
Email Address: *	studio@ruraldesign.net				
Is the applicant an individual or an organisation/corporate entity? *					
Applicant Details					
Please enter Applicant details					
Title:		You must enter a Building Name or Number, or both: *			
Other Title:		Building Name:	Port Mor House		
First Name: *		Building Number:			
Last Name: *		Address 1 (Street): *	Port Mor		
Company/Organisation	Isle of Muck Community Enterprise	Address 2:	Isle of Muck		
Telephone Number: *		Town/City: *	by Mallaig		
Extension Number:		Country: *	UK		
Mobile Number:		Postcode: *	PH41 2RP		
Fax Number:					
Email Address: *	studio@ruraldesign.net				

Proposal/Application Details

Please provide the details of the original application(s) below:

Was the original application part of this proposal? *

Application Details

Please select which application(s) the new documentation is related to.

Application: *

100667002-001, application for Planning Permission, submitted on 05/04/2024

Document Details

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

Planning request regarding private water supply

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. *

25/04/2024

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: - Rural Design

Declaration Date:

X Yes No

X Yes No