



Newtown St Boswells Melrose TD6 0SA Tel: Payments/General Enquiries 01835 825586 Email: regadmin@scotborders.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 100512296-001

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.

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:	Ferguson Planning		
Ref. Number:	<input type="text"/>	You must enter a Building Name or Number, or both: *	
First Name: *	-	Building Name:	Shiel House
Last Name: *	-	Building Number:	54
Telephone Number: *	01896 668744	Address 1 (Street): *	Island Street
Extension Number:	<input type="text"/>	Address 2:	<input type="text"/>
Mobile Number:	<input type="text"/>	Town/City: *	Galashiels
Fax Number:	<input type="text"/>	Country: *	Scotland
		Postcode: *	TD1 1NU
Email Address: *	Ruaraidh@fergusonplanning.co.uk		

Is the applicant an individual or an organisation/corporate entity? *

Individual Organisation/Corporate entity

Applicant Details			
Please enter Applicant details			
Title:	<input type="text" value="Other"/> You must enter a Building Name or Number, or both: *		
Other Title:	<input type="text" value="Mr & Mrs"/> Building Name: <input type="text" value="Shiel House"/>		
First Name: *	<input type="text" value="N & C"/> Building Number: <input type="text" value="54"/>		
Last Name: *	<input type="text" value="Cameron"/> Address 1 (Street): * <input type="text" value="Island Street"/>		
Company/Organisation	<input type="text" value="per Agent"/> Address 2: <input type="text"/>		
Telephone Number: *	<input type="text"/> Town/City: * <input type="text" value="Galashiels"/>		
Extension Number:	<input type="text"/> Country: * <input type="text" value="Scotland"/>		
Mobile Number:	<input type="text"/> Postcode: * <input type="text" value="TD1 1NU"/>		
Fax Number:	<input type="text"/>		
Email Address: *	<input type="text" value="Ruaraidh@fergusonplanning.co.uk"/>		
Site Address Details			
Planning Authority:	<input type="text" value="Scottish Borders Council"/>		
Full postal address of the site (including postcode where available):			
Address 1:	<input type="text"/>		
Address 2:	<input type="text"/>		
Address 3:	<input type="text"/>		
Address 4:	<input type="text"/>		
Address 5:	<input type="text"/>		
Town/City/Settlement:	<input type="text"/>		
Post Code:	<input type="text"/>		
Please identify/describe the location of the site or sites			
<input type="text" value="Application site 21/00710/PPP"/>			
Northing	<input type="text" value="634991"/>	Easting	<input type="text" value="354829"/>

Description of Proposal

Please provide a description of your proposal to which your review relates. The description should be the same as given in the application form, or as amended with the agreement of the planning authority: * (Max 500 characters)

Erection of dwellinghouse with access, landscaping and associated works

Type of Application

What type of application did you submit to the planning authority? *

Application for planning permission (including householder application but excluding application to work minerals).

Application for planning permission in principle.

Further application.

Application for approval of matters specified in conditions.

What does your review relate to? *

Refusal Notice.

Grant of permission with Conditions imposed.

No decision reached within the prescribed period (two months after validation date or any agreed extension) – deemed refusal.

Statement of reasons for seeking review

You must state in full, why you are seeking a review of the planning authority's decision (or failure to make a decision). Your statement must set out all matters you consider require to be taken into account in determining your review. If necessary this can be provided as a separate document in the 'Supporting Documents' section: * (Max 500 characters)

Note: you are unlikely to have a further opportunity to add to your statement of appeal at a later date, so it is essential that you produce all of the information you want the decision-maker to take into account.

You should not however raise any new matter which was not before the planning authority at the time it decided your application (or at the time expiry of the period of determination), unless you can demonstrate that the new matter could not have been raised before that time or that it not being raised before that time is a consequence of exceptional circumstances.

Please see Local Review Statement

Have you raised any matters which were not before the appointed officer at the time the Determination on your application was made? * Yes No

If yes, you should explain in the box below, why you are raising the new matter, why it was not raised with the appointed officer before your application was determined and why you consider it should be considered in your review: * (Max 500 characters)

Please provide a list of all supporting documents, materials and evidence which you wish to submit with your notice of review and intend to rely on in support of your review. You can attach these documents electronically later in the process: * (Max 500 characters)

Please see Local Review Statement

Application Details

Please provide the application reference no. given to you by your planning authority for your previous application. 21/00710/PPP

What date was the application submitted to the planning authority? * 30/04/2021

What date was the decision issued by the planning authority? * 12/11/2021

Review Procedure

The Local Review Body will decide on the procedure to be used to determine your review and may at any time during the review process require that further information or representations be made to enable them to determine the review. Further information may be required by one or a combination of procedures, such as: written submissions, the holding of one or more hearing sessions and/or inspecting the land which is the subject of the review case.

Can this review continue to a conclusion, in your opinion, based on a review of the relevant information provided by yourself and other parties only, without any further procedures? For example, written submission, hearing session, site inspection. *

Yes No

In the event that the Local Review Body appointed to consider your application decides to inspect the site, in your opinion:

Can the site be clearly seen from a road or public land? * Yes No

Is it possible for the site to be accessed safely and without barriers to entry? * Yes No

Checklist – Application for Notice of Review

Please complete the following checklist to make sure you have provided all the necessary information in support of your appeal. Failure to submit all this information may result in your appeal being deemed invalid.

Have you provided the name and address of the applicant? * Yes No

Have you provided the date and reference number of the application which is the subject of this review? * Yes No

If you are the agent, acting on behalf of the applicant, have you provided details of your name and address and indicated whether any notice or correspondence required in connection with the review should be sent to you or the applicant? * Yes No N/A

Have you provided a statement setting out your reasons for requiring a review and by what procedure (or combination of procedures) you wish the review to be conducted? * Yes No

Note: You must state, in full, why you are seeking a review on your application. Your statement must set out all matters you consider require to be taken into account in determining your review. You may not have a further opportunity to add to your statement of review at a later date. It is therefore essential that you submit with your notice of review, all necessary information and evidence that you rely on and wish the Local Review Body to consider as part of your review.

Please attach a copy of all documents, material and evidence which you intend to rely on (e.g. plans and Drawings) which are now the subject of this review * Yes No

Note: Where the review relates to a further application e.g. renewal of planning permission or modification, variation or removal of a planning condition or where it relates to an application for approval of matters specified in conditions, it is advisable to provide the application reference number, approved plans and decision notice (if any) from the earlier consent.

Declare – Notice of Review

14 We the applicant/agent certify that this is an application for review on the grounds stated.

Declaration Name:



Declaration Date:

8/12/21