

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

100575025-001

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.

your form is validated. I lease 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 Applicant						
Agent Details						
Please enter Agent details						
Company/Organisation:	Ferguson Planning					
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Lucy	Building Name:				
Last Name: *	Moroney	Building Number:	54			
Telephone Number: *	01896 668 744	Address 1 (Street): *	Island Street			
Extension Number:		Address 2:	Galasheils			
Mobile Number:		Town/City: *	Scottish Borders			
Fax Number:		Country: *	Scotland			
		Postcode: *	TD1 1NU			
Email Address: *	lucy@fergusonplanning.co.uk					
Is the applicant an individual or an organisation/corporate entity? *						
✓ Individual ☐ Organisation/Corporate entity						

Applicant Details							
Please enter Applicant details							
Title:	Mr	You must enter a Bu	illding Name or Number, or both: *				
Other Title:		Building Name:	c/o Agent				
First Name: *	James	Building Number:					
Last Name: *	Hewit	Address 1 (Street): *	c/o Agent				
Company/Organisation		Address 2:	c/o Agent				
Telephone Number: *		Town/City: *	c/o Agent				
Extension Number:		Country: *	c/o Agent				
Mobile Number:		Postcode: *	c/o agent				
Fax Number:							
Email Address: *	lucy@fergusonplanning.co.uk						
Site Address	s Details						
Planning Authority:	Scottish Borders 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							
Land adjoining 16 Hendersyde Drive, Kelso, TD5 7TQ							
Northing	635137	Easting	373382				

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)						
Appeal Statement and Core Documents						
Application Details						
Please provide the application reference no. given to you by your planning authority for your previous application.	22/00093/PPP					
What date was the application submitted to the planning authority? *	25/01/2022	1/2022				
What date was the decision issued by the planning authority? *	29/04/2022					
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 \sum No						
In the event that the Local Review Body appointed to consider your application decides to in-	spect the site, in your o	oinion:				
Can the site be clearly seen from a road or public land? *	\boxtimes	🛛 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 treview? *	his X Yes 🗌	No				
If you are the agent, acting on behalf of the applicant, have you provided details of your nam and address and indicated whether any notice or correspondence required in connection wit review should be sent to you or the applicant? *		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? *	X 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

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

Declaration Name: Miss Lucy Moroney

Declaration Date: 08/06/2022