the moray council							
The Moray Council Council Office, High Street Elgin IV30 1BX							
Tel: 01343 563 501							
Fax: 01343 563 263	Fax: 01343 563 263						
Email: development.control@	Email: development.control@moray.gov.uk						
Planning Department							
Applications cannot be validated until all necessary documentation has been submitted and the required fee has been paid.							
Thank you for completing this	application form:						
ONLINE REFERENCE	000031357-001						
The online ref number 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)							
Agent Details							
Please enter Agent details							
Company/Organisation:	CM DESIGN	You must enter a Building N both:*	Name or Number, or				
Ref. Number:	110047/WILSON	Building Name:	ST BRENDANS HOUSE				
First Name: *	CRAIG	Building Number:					
Last Name: *	MACKAY	Address 1 (Street): *	SOUTH GUILDRY STREET				
Telephone Number: *	01343 540020	Address 2:					
Extension Number:		Town/City: *	ELGIN				
Mobile Number:		Country: *	UK				
Fax Number:	01343 540020	Postcode: *	IV30 1QN				
Email Address: *	office@cmdesign.biz						
Is the applicant an individual or an organisation/corporate entity? *							
Individual Organisation/Corporate entity							

Anneliaant Data	1a				
Applicant Deta					
Please enter Applicant deta	ails				
Title: *	Mr	You must enter a Build both:*	You must enter a Building Name or Number, or both:*		
Other Title:		Building Name:	CAIRNHILL COTTAGE		
First Name: *	RICHARD	Building Number:			
Last Name: *	WILSON	Address 1 (Street): *	GRANGE		
Company/Organisation:		Address 2:			
Telephone Number:		Town/City: *	KEITH		
Extension Number:		Country: *	MORAY		
Mobile Number:		Postcode: *	AB55 6SP		
Fax Number:					
Email Address:					
Site Address D	etails				
Full postal address of the s	ite (including postcode where availa	able):			
Address 1:	CAIRNHILL COTTAGE	Address 5:			
Address 2:	KNOCK	Town/City/Settlement	кеітн		
Address 3:		Post Code:	AB55 6SP		
Address 4:					
Please identify/describe the	e location of the site or sites.	_			
		_			
Northing 8513	311	Easting	350755		
Description of	the Proposal				
- Please provide a descriptio	n of the proposal to which your revi nded with the agreement of the plan	ew relates. The description sho nning authority: *	ould be the same as given in the		
· · ·	RNHILL COTTAGE, KNOCK, KEIT	TH, MORAY			
	,,,.,.,.,.,.,.,.,.,.,.,.,,.,.,,	,			

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) – 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 of 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.					
SEE ATTACHED STATEMENT					
Have you raised any matters which were not before the appointed officer at the time the determination on your application was made? *					
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)					
SEE ATTACHED STATEMENT					
Application Details					
Please provide details of the application and decision.					
What is the application reference number? * 11/01011/APP					
What date was the application submitted to the planning authority? * 27/06/11					
Has a decision been made by the planning authority? *					
What date was the decision issued by the planning authority? *					

Review Procedure	9				
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 con parties only, without any further p	clusion, in your opinion, based on a review of the relevant information or ocedures? For example, written submission, hearing session, site	tion provided by yourself and other e inspection. *			
🗸 Yes 🗌 No					
In the event that the Local Review	w Body appointed to consider your application decides to inspect th	he site, in your opinion:			
Can the site be clearly seen from	a road or public land? *	Ves No			
Is it possible for the site to be acc	cessed safely and without barriers to entry? *	Ves No			
Checklist - Applica	ation 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	I address of the applicant? *	Yes No			
Have you provided the date and i	reference number of the application which is the subject of this revie	riew? * 📝 Yes 🗌 No			
	half of the applicant, have you provided details of your name and ny notice or correspondence required in connection with the review icant? *	v			
		Yes No N/A			
Have you provided a statement s (or combination of procedures) yo	etting out your reasons for requiring a review and by what procedur ou wish the review to be conducted? *	ure 📝 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 docun drawings) which are now the sub	nents, material and evidence which you intend to rely on (e.g. plans ject of this review *	is and 📝 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	f Review				
I/We the applicant/agent certify that this is an application for review on the grounds stated.					
Declaration Name:	CRAIG MACKAY				
Declaration Date:	21/11/2011				
Submission Date:	21/11/2011				