Ref: AB1

ARGYLL AND BUTE COUNCIL

WWW.ARGYLL-BUTE.GOV.UK/**

OFF	CIAL	USF
\mathbf{v}		· OOL

Date Received

NOTICE OF REVIEW

Notice of Request for Review under Section 43(a)8 of the Town and Country Planning (Scotland) Act 1997 and the Town and Country Planning (Schemes of Delegation and Local Review Procedures (Scotland) Regulations 2008

Important – Please read the notes on how to complete this form and use Block Capitals. Further information is available on the Council's Website. You should, if you wish, seek advice from a Professional Advisor on how to complete this form.

(1) APPI	LICANT FOR REVIEW		(2) AGE	NT (if any)
Name	MR GEORGE PATON		Name	ANDREW SWAIN
Address	FLAT 3/2 FALCONER COURT			A & K SOLUTIONS LTD
			Address	31 CHURCHILL DRIVE
	COMMERCIAL ROAD			BISHOPTON
	STRATHAVEN		Postcode	PA7 5HF
Postcode	ML10 6LX		Tel. No.	07799331107
Tel. No.			Email	andrew_swain@ aandksolutions.co.uk
Email				
(3) Do you wish correspondence to be sent to you or your agent				
(4) (a) Re	eference Number of Planr	ning Ap	oplication	12/00648/PP
(b) Da	ite of Submission			21 MARCH 2012
(c) Da	te of Decision Notice (if a	pplica	ble)	29 JUNE 2012
(5) Addres	ss of Appeal Property		AND SOUTH LENDARUEI	OF GARCHELL, CLACHAN OF

(6)	Description	of Proposa
-----	-------------	------------

ERECTION OF DWELLINGHOUSE AND INSTALLATION OF SEPTIC TANK

Please set out the detailed	reasons for requesting the review:-	
SEE PAPER APART		

(8) If the Local Review Body determines that it requires further information on "specified matters" please indicate which of the following procedure you would prefer to provide such information:-				
(a) De	ealt with by written submission			
(b) De	ealt with by Local Hearing			
(c) De	(c) Dealt with by written submission and site inspection			
(d) De	ealt with by local hearing and site inspection			
NB It is a r	matter solely for the Local Review Body to determine if further info	ormation		
is required	and, if so, how it should be obtained.			
applic	e list in the schedule all documentation submitted as part of ation for review ensuring that each document corresponds tering in the sections below:-			
copies	ule of documents submitted with Notice of Review (Note: 3 of each of the documents referred to in the schedule be attached):			
No.	Detail			
No.	Detail Review Statement pdf			
1	Review Statement pdf			
1 2	Review Statement pdf			
1 2 3	Review Statement pdf			
1 2 3 4	Review Statement pdf			
1 2 3 4 5	Review Statement pdf			
1 2 3 4 5 6	Review Statement pdf			
1 2 3 4 5 6	Review Statement pdf			
1 2 3 4 5 6 7 8	Review Statement pdf			

Submitted by (Please Sign)	Al	Dated	17/06/12
Important Note	s for Guidance		
be set or 2. All docur intends to Review I 15 or by 3. Guidanc website 4. If in doul localrevi Committe Lochgilp 6. You will electroni	ers which the applicant intent in or accompany this Norments, materials and evide to rely on in the Review musure of the Hearing See on the procedures can be www.argyll-bute.gov.uk/ but how to proceed please completed this form can be exprocess@argyll-bute.gov.uk/ the second the process argyll-bute.gov.uk/ the second the proceed please completed this form can be exprocess@argyll-bute.gov.uk/ the second t	tice of Review ence which the applicate accompany the ist accompany the ist accompany the ist required und ession Rules. The found on the Contact 01546 604 ov.uk or returned Board), Kilmory, and of this form, un 14 days of the incompany of the	oplicant ne Notice of ler Regulation ouncil's 1406 or email by post to
If you have an		otion of this fam.	
If you have any queries relating to the completion of this form please contact Committee Services on 01546 604406 or email localreviewprocess@argyll-bute.gov.uk			
For official use only			
Date form issue	d		

Issued by (please sign)