



Business Centre G.2 Waverley Court 4 East Market Street Edinburgh EH8 8BG Email: [planning.support@edinburgh.gov.uk](mailto:planning.support@edinburgh.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 100689974-001

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.

## Site Address Details

Planning Authority:

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

Northing

Easting

## 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

## Applicant Details

Please enter Applicant details

|                      |                                                            |                                                      |                                             |
|----------------------|------------------------------------------------------------|------------------------------------------------------|---------------------------------------------|
| Title:               | <input type="text" value="Mr"/>                            | You must enter a Building Name or Number, or both: * |                                             |
| Other Title:         | <input type="text"/>                                       | Building Name:                                       | <input type="text"/>                        |
| First Name: *        | <input type="text" value="Louis"/>                         | Building Number:                                     | <input type="text" value="85"/>             |
| Last Name: *         | <input type="text" value="Sheridan-bruce"/>                | Address 1 (Street): *                                | <input type="text" value="glasgow road"/>   |
| Company/Organisation | <input type="text" value="Almond park motor company ltd"/> | Address 2:                                           | <input type="text"/>                        |
| Telephone Number: *  | <input type="text" value="REDACTED"/>                      | Town/City: *                                         | <input type="text" value="Edinburgh"/>      |
| Extension Number:    | <input type="text"/>                                       | Country: *                                           | <input type="text" value="United kingdom"/> |
| Mobile Number:       | <input type="text"/>                                       | Postcode: *                                          | <input type="text" value="EH12 8LJ"/>       |
| Fax Number:          | <input type="text"/>                                       |                                                      |                                             |
| Email Address: *     | <input type="text" value="REDACTED"/>                      |                                                      |                                             |

## Type of Application

This application is to ascertain whether one or both of the following would be lawful: \*

- ☒ Proposed use of buildings or other land.
- ☒ Proposed operations to be carried out in, on, over or under land (building operation or development).

Please describe in detail the use or development/operations for which you are seeking the certificate: \* (Max 500 characters)

Carry out class 1 and 2 MOTs within the building Class 5 use. Prior to unit 9 division to for unit 9A, this unit is of class 5 use.

## Description of Proposed Use of Buildings or Other Land and/or Proposed Operations

Existing Use Class

Please state the existing Use Class as described in the Town and Country Planning (Use Classes) (Scotland) Order 1997. Where building or land is vacant, state last known use: \*

Class 5 General Industry

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------|------------------|--------|----|-----------------------|------------------|--------------|--|------------|--|---------------|-------|--------------|-----------|--------------|----------------|------------|----------|------------------------------------------------------|--|-------------|----------|----------------|--|--|--|------------------|----|--|--|----------------------------------------------------------------------------------------------------|--|--|--|
| <p><b>Description of Proposal</b></p> <p>Please describe in detail the proposed use of buildings or other land for which the Certificate is sought and/or proposed operations to be carried out in, on, over or under land: * (Max 500 characters)</p> <div style="border: 1px solid black; height: 60px; margin-top: 5px; padding: 5px;">             carry out class 1 and 2 mots. unit has already been class5 general industrial use.           </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p>Is the proposed use: *      <input type="checkbox"/> Temporary    <input checked="" type="checkbox"/> Permanent</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p><b>Pre-Application Discussion</b></p> <p>Have you discussed your proposal with the planning authority? *      <input type="checkbox"/> Yes    <input checked="" type="checkbox"/> No</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p><b>Any other Particulars or Supplementary Information</b></p> <p>Please provide any other particulars or information here which you consider may be relevant.: * (Max 500 characters)</p> <div style="border: 1px solid black; height: 60px; margin-top: 5px; padding: 5px;">             The building that our proposed location is within is currently being used for class 4 MOTs. Class 1 and 2 MOT vehicle would be kept within the property. No vehicles kept outside           </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p><b>List of Documents, Drawings or Plans which accompany this Application</b></p> <p>Please provide a full list of documentation, drawings or plans which accompany this application which you are submitting as supporting information and evidence: * (Max 500 characters)</p> <div style="border: 1px solid black; height: 60px; margin-top: 5px; padding: 5px;">             Site plan           </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p><b>Interest in Land</b></p> <p>Please state the applicant's interest in the land: *      <input type="checkbox"/> Owner    <input type="checkbox"/> Lessee    <input checked="" type="checkbox"/> Tenant    <input type="checkbox"/> Occupier    <input type="checkbox"/> Other</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| <p>As you have indicated that you are not the owner please provide further details.</p> <p>Please give details of the owner and state whether they have been informed in writing of this appeal:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">Title:</td> <td style="width: 30%; border: 1px solid black; padding: 2px;">Mr</td> <td style="width: 15%;">Address 1 (Street): *</td> <td style="width: 40%; border: 1px solid black; padding: 2px;">st ninians drive</td> </tr> <tr> <td>Other Title:</td> <td style="border: 1px solid black; height: 20px;"></td> <td>Address 2:</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>First Name: *</td> <td style="border: 1px solid black; padding: 2px;">Louis</td> <td>Town/City: *</td> <td style="border: 1px solid black; padding: 2px;">Edinburgh</td> </tr> <tr> <td>Last Name: *</td> <td style="border: 1px solid black; padding: 2px;">Sheridan-Bruce</td> <td>Country: *</td> <td style="border: 1px solid black; padding: 2px;">Scotland</td> </tr> <tr> <td colspan="2">You must enter a Building Name or Number, or both: *</td> <td>Postcode: *</td> <td style="border: 1px solid black; padding: 2px;">eh12 8aj</td> </tr> <tr> <td>Building Name:</td> <td style="border: 1px solid black; height: 20px;"></td> <td colspan="2"></td> </tr> <tr> <td>Building Number:</td> <td style="border: 1px solid black; padding: 2px;">9A</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">           Has the Owner been informed? *      <input checked="" type="checkbox"/> Yes    <input type="checkbox"/> No         </td> </tr> </table> |                |                       |                  | Title: | Mr | Address 1 (Street): * | st ninians drive | Other Title: |  | Address 2: |  | First Name: * | Louis | Town/City: * | Edinburgh | Last Name: * | Sheridan-Bruce | Country: * | Scotland | You must enter a Building Name or Number, or both: * |  | Postcode: * | eh12 8aj | Building Name: |  |  |  | Building Number: | 9A |  |  | Has the Owner been informed? * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |  |  |  |
| Title:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Mr             | Address 1 (Street): * | st ninians drive |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| Other Title:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                | Address 2:            |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| First Name: *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Louis          | Town/City: *          | Edinburgh        |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| Last Name: *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | Sheridan-Bruce | Country: *            | Scotland         |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| You must enter a Building Name or Number, or both: *                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                | Postcode: *           | eh12 8aj         |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| Building Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| Building Number:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 9A             |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |
| Has the Owner been informed? * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                       |                  |        |    |                       |                  |              |  |            |  |               |       |              |           |              |                |            |          |                                                      |  |             |          |                |  |  |  |                  |    |  |  |                                                                                                    |  |  |  |

## Planning Service Employee/Elected Member Interest

Is the applicant, or the applicant's spouse/partner, either a member of staff within the planning service or an elected member of the planning authority? \* ☐ Yes ☒ No

## Checklist – Application for a Certificate of Lawfulness for a Proposed Use or Development

The provision of sufficient proof in a Certificate of Lawfulness is firmly with the applicant and therefore sufficient and precise information should be provided.

Please complete the following checklist to make sure you have provided all the necessary information in support of your application. Failure to submit all this information may result in your application being deemed invalid. The Planning Authority will not start processing your application until it is valid.

A copy of a plan, showing the boundary of the site. The plan should identify the land to which the application relates and should be drawn to an identified scale. Where such an application specifies two or more uses, operations or other matters, the plan which accompanies the application is to indicate to which part of the land each such use, operation or other matter relates. \* ☒ Yes ☐ No

All the evidence provided in support of your application, as detailed in your answers. \* ☒ Yes ☐ No

A statement setting out the applicant's interest in the land, the name and address of any other person known to the applicant to have an interest in the land and whether any such other person has been notified of the application. \* ☒ Yes ☐ No

You must submit a fee with your application. Your application will not be able to be validated until the appropriate fee has been received by the planning authority.

## Declare – Certificate of Lawfulness – Proposed Use or Development

I, the applicant/agent certify that this is an application for a certificate of Lawfulness as described in this form and the accompanying plans/drawings and additional information.

Declaration Name: Mr Louis Sheridan-bruce

Declaration Date: 06/01/2025

### WARNING

Section 153 of the 1997 Act provides that it is an offence to knowingly or recklessly provide false or misleading information or to withhold material information with intent to deceive.

Section 152(7) enables the planning authority to revoke, at any time, a certificate they may have issued as a result of such false or misleading information or if material information has been withheld.