

Business Centre G.2 Waverley Court 4 East Market Street Edinburgh EH8 8BG Tel: 0131 529 3550 Email: [planning@edinburgh.gov.uk](mailto:planning@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 100687865-006

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.

## Description of Proposed Works to Listed Building

Are the proposals to alter, extend or demolish the listed building(s)? \*  Yes  No

If Yes, please provide further details: \* (Max 500 characters)

Minor amendments to the approved Listed Building Consent Scheme associated with application 24/04931/LBC granted on 30 January 2025. Consent is requested for the provision of external service penetrations and the removal of Velux windows previously approved within the aforementioned consent.

Has the work already been started and/or completed? \*

No  Yes – Started  Yes - Completed

Please Note: it can be a criminal offence to undertake works that require listed building consent in advance of obtaining consent.

Please state date of completion, or if not completed, the start date (dd/mm/yyyy): \*

20/02/2026

Please explain why work has taken place in advance of making this application: \* (Max 500 characters)

The new service penetrations form part of the approved works associated with 24/04931/LBC however the specific location of these services was unknown at the time that the original planning application was made - only becoming known as the technical scheme was developed as part of the building warrant.

## 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="Douglas"/>               | Building Number:                                     | <input type="text" value="5"/>             |
| Last Name: *         | <input type="text" value="Stirling"/>              | Address 1 (Street): *                                | <input type="text" value="Duncan Street"/> |
| Company/Organisation | <input type="text" value="Newington Dental Care"/> | 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="Scotland"/>      |
| Mobile Number:       | <input type="text"/>                               | Postcode: *  | <input type="text" value="EH9 1SZ"/>       |
| Fax Number:          | <input type="text"/>                               |  |  |
| Email Address: *     | <input type="text" value="REDACTED"/>              |  |  |

## Site Address Details

|   |  |
|---|--|
| Planning Authority:   | <input type="text" value="City of Edinburgh Council"/> |
| Full postal address of the site (including postcode where available): |  |
| Address 1:  | <input type="text" value="5 DUNCAN STREET"/>           |
| Address 2:  | <input type="text" value="NEWINGTON"/>                 |
| Address 3:  | <input type="text"/>                                   |
| Address 4:  | <input type="text"/>                                   |
| Address 5:  | <input type="text"/>                                   |
| Town/City/Settlement:   | <input type="text" value="EDINBURGH"/>                 |
| Post Code:  | <input type="text" value="EH9 1SZ"/>                   |

Please identify/describe the location of the site or sites

|          |                                     |         |                                     |
|----------|-------------------------------------|---------|-------------------------------------|
| Northing | <input type="text" value="672017"/> | Easting | <input type="text" value="326566"/> |
|----------|-------------------------------------|---------|-------------------------------------|

## Existing and Proposed Uses

Please describe the current use: \* (Max 500 characters)

Dental Practice (Currently under construction with a scheduled opening date at the end of March 2026)

Please describe the proposed use: \* (Max 500 characters)

Dental Practice (Currently under construction with a scheduled opening date at the end of March 2026)

## Pre-Application Discussion

Have you discussed your proposal with the planning authority? \*

Yes  No

## Pre-Application Discussion Details Cont.

In what format was the feedback given? \*

Meeting  Telephone  Letter  Email

Please provide a description of the feedback you were given and the name of the officer who provided this feedback. If a processing agreement [note 1] is currently in place or if you are currently discussing a processing agreement with the planning authority, please provide details of this. (This will help the authority to deal with this application more efficiently.) \* (max 500 characters)

Telephone conversation with Adam Gloser. An application for a non-material variation to Planning Consent Reference 24 / 04930 / FUL has also been made.

Title:

Mr

Other title:

First Name:

Adam Gloser

Last Name:

Correspondence Reference Number:

n/a

Date (dd/mm/yyyy):

30/01/2026

Note 1. A Processing agreement involves setting out the key stages involved in determining a planning application, identifying what information is required and from whom and setting timescales for the delivery of various stages of the process.

## Listed Building Category

Please state the category of listing (if known) of the building in the list of Buildings of Special Architectural or Historic interest: \*

- Category A  
 Category B  
 Category C  
 A (Group)  
 B (Group)  
 Ecclesiastical Category A  
 Ecclesiastical Category B  
 Ecclesiastical Category C  
 Don't Know

## Demolition of Listed Building

Does the proposal involve demolition of a listed building or a building within the curtilage of a listed building? \*

- Total or substantial demolition of the listed building  
 Total or substantial demolition of a building within the curtilage of the listed building  
 Other (partial demolition or alterations)

## Listed Building Alterations

Do the proposed works include alterations and/or extension to a listed building? \*  
(This may be in addition to any demolition works specified previously)

Yes  No

Does the proposal include:

Works to the exterior of the building? This would include works to any structure or object fixed to the building  
Or to any other buildings within its curtilage: \*  Yes  No

Works to the interior of the building? This should include any stripping out of any internal features eg. Wall,  
Ceiling, plasterwork, joinery, panelling, fireplaces, chimney pieces, staircases, ironmongery, doors, flooring,  
Floor finishes/floorboards, tiling, stencilled decoration, fixed furniture and fittings, including machinery: \*  Yes  No

Please state the number of attachments you will be including with this proposal, this may include plans, drawings and photographs sufficient to identify the location, extent and character of the items to be altered, extended or removed, and the proposal for their replacement, including any new means of structural support and detailed specification of proposed finishing materials.

Number of plans, drawings and photographs in total? \*

5

## Proposal Relating to Listed Building

Are there any current applications or existing consents or permissions for this site? \*

Yes  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

## Certificates and Notices

Certificate and Notice

The Planning (Listed Buildings and Conservation Areas) (Scotland) Act 1997

The Town and Country Planning (Listed Building and Buildings in Conservation Areas) (Scotland) Regulations 1987

One Certificate must be completed and submitted along with this form; either Certificate A, Certificate B or Certificate C.

Are you the sole owner of ALL the land/building relevant to this proposal? \*  Yes  No

## Certificate Required

The following Land Ownership Certificate is required to complete this section of the proposal:

Certificate A

## Land Ownership Certificate

Certificate and Notice

The Planning (Listed Buildings and Conservation Areas) (Scotland) act 1997

The Town and Country Planning (Listed Buildings and Buildings in Conservation Areas) (Scotland) Regulations 1987

Certificate A

I hereby certify that – (See the help section for notes)

(1) - No person other than myself/the applicant was an owner [Note 1] of any part of the land to which the application relates at the beginning of the period of 21 days ending with the date of the accompanying appeal.

Signed: Douglas Stirling

Date: 23/02/2026 22:43:25

Please tick here to certify this Certificate. \*

## Checklist – Application for Listed Building Consent

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

A Location plan which identifies the land to which the application relates drawn to an identified scale  
And showing the direction of north. \*  Yes  No

A copy of other detailed plans, drawings, photographs (with annotations to describe the details of  
Materials and workmanship) as necessary to describe your proposals. \*  Yes  No

Elevations. \*  Yes  No

Floor Plans. \*  Yes  No

Roof Plan. \*  Yes  No

Does your plan include:

- |                                       |   |
|---------------------------------------|---|
| Sections. *                           | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Perspectives of Photomontages. *      | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Block Plan. *                         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |
| Special Detailed Drawing. *           | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Detailed specification of finishes. * | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| Current or old photographs. *         | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |

What other information are you submitting in support of your application? \*

- Design Statement.
- Supporting Statement.
- Condition Survey Report.
- Feasibility Study.
- Development Appraisal.
- Environmental Impact Statement.
- Conservation Survey/Statement/Plan.
- Other.

As you have selected "other" from the information in support of your application list please provide further details. \* (Max 500 characters)

No other supporting information required.

## Declare – Listed Building Consent

I, the applicant/agent certify that this is an application for listed building consent as described in this form the accompanying plan/drawings and additional information.

Declaration Name: Mr Douglas Stirling

Declaration Date: 23/02/2026