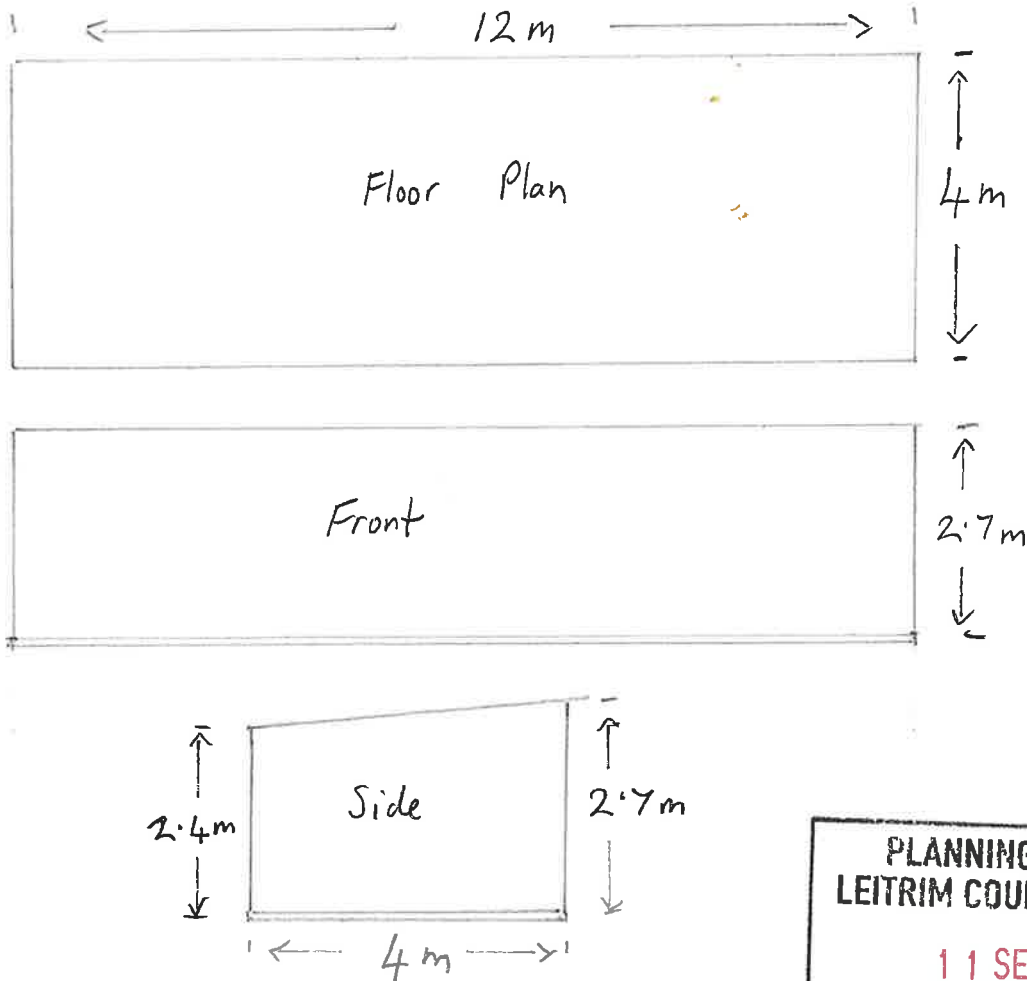


Telephone No. (optional)	AS ABOVE
Email Address (if any)	
Fax No. (if any)	

11. Owner (required where applicant is not the owner):

Name of Owner (Required)	AS ABOVE
Address (required)	
Telephone No. (optional)	
Email Address (if any)	



PLANNING SECTION
LEITRIM COUNTY COUNCIL
11 SEP 2026
ED-26-88
REF P. _____