# PLANNING AMENDMENT

**For Office Use only**

Application No:

Date Registered:

Case Officer:

SOUTH HOLLAND DISTRICT COUNCIL

(Please complete using block capitals and black ink)

| **APPLICANT NAME AND ADDRESS** | **AGENT NAME AND ADDRESS** |
|---|---|
| Emerald Homes Lincolnshire Limited<br>c/o Lincs Design Consultancy Ltd<br>12 Vickers Lane<br>Louth<br>Lincolnshire<br>LN11 9PJ<br><br>Telephone: | Lincs Design Consultancy Ltd<br>12 Vickers Lane<br>Louth<br>Lincolnshire<br>LN11 9PJ<br><br>Telephone: 01507 611155 |

| **SITE ADDRESS DETAILS** | |
|---|---|
| Home Farm<br>Littleworth Drove<br>Deeping St Nicholas<br>Spalding, Lincolnshire | |
| **CURRENT APPLICATION NO:**<br>This amendment cannot be considered unless the relevant reference is stated. | H03-1044-24 |
| Building Regulation reference relating to same development (if applicable) | |

I attach four copies of this form and necessary plans and request that the changes described below can be accepted as an amendment. As the amendment relates to a current application.

Signed : Ricky Newton Date: 18/12/2024

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|---|---|---|
| **FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO** | Details of existing and proposed site levels, proposed floor levels, hard surfaced areas, garden/amenity areas, mitigation measures and external materials | |
| State details of amendments proposed.<br>(Give a full detailed list of the changes, and also mark these clearly on the accompanying plans. Only the changes listed here will be considered) | Amended cycle storage key | |
| State drawing numbers of the current submission | LDC4244-151 | |
| Has this amendment been requested by the Council? (If so, state Officer dealing with the application) | YES/NO | No |
| Describe any part of the original development which is excluded by virtue of the amendment, and state any alteration to plot numbers | N/A | |
| Has a similar amendment been submitted under Building Regulations? (If so, state Building Control Surveyor dealing with application) | YES/NO | No |