

PLANNING AMENDMENT

For office use only

Application No.

H08/036/00

Date Registered

31 MAR 2000

Case Officer

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MRS D FYSON

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

AMDEGA LTD

Tel. No.

**OFFICE
COPY**
(Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

BRICKFIELD, BOSTON ROAD, SPALDING

Please complete

APPLICATION No.This amendment cannot be considered
unless the relevant reference is stated

H08/036/00

Building Regulation reference relating to
same development (if any)2. Please tick **one** box onlyAmendment is proposed where
permission already granted

If yes, submit two forms and two plans.

A

☐

or

Amendment is to a proposal
currently being considered

If yes, submit four forms and four plans.

B

☒

Please complete

I attach the necessary plans and request that the changes described below be accepted as an amendment.
I understand that the Council may require a fresh application, together with fee if appropriate. If the
amendment relates to a current application, I agree to an extension of the terminal date.

Signed Date

3. Please complete in block letters

**FULL DESCRIPTION OF DEVELOPMENT
IN ORIGINAL APPLICATION**ERECT SINGLE STOREY
TIMBER FRAMED, GLAZED
CONSERVATORY

State details of amendments proposed

(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 LOCATION
+ BLOCK PLANS

State drawing no's of the current submission

Has this amendment been requested by the Council?
(If so, state Officer dealing with the application)

YES / NO

Describe any part of the original development
which is excluded by virtue of the amendment,
and state any alteration to plot numbers

Has a similar amendment been submitted under Building Regulations?

Yes / No

AMENDMENT RECORD SHEET - LIVE APPLICATION

Admin

Validation:

Inadequate/Inappropriate

Clarification/Details required:

Appears valid

Registered

Terminal date/committee
updated

DC Procedural Assessment

Is the information given correct?

Yes/No (If No, state above what
details are needed)

Has this amendment been requested?
If Yes, is it what was asked for?

Yes/No *
Yes/No *

Who do you need to reconsult as a
result of this amendment?

PC None
WM
Press
Residents
Other -

Is it an amendment in principle?

Yes/No

Is it the same character/description
for fee purposes?

Yes/No (Refer to Admin ?)

If No, but Yes to (*) requested :-

Do development objectives outweigh
financial objectives?

Yes/No Confirmed.....

REJECTED as an amendment - new
application needed

Confirmed:

Notes/Advice/Rejection Reason:

AUTHORISED to treat as amendment

Confirmed:

Superseded details removed

Give a revised description if
the details accepted are
different to the submission:

☐ Tick if you wish this note to be
a paragraph in the Rejection Notice

Acceptance issued:
Public register updated:

DC Professional Assessment

NOTES: