

# PLANNING AMENDMENT

For Office Use only

Application No:

Date Registered:

Case Officer:



(Please complete using block capitals and black ink)

|                                                                                                                 |  |                                                                                                                                                     |  |
|-----------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>APPLICANT NAME AND ADDRESS</b><br><br>MR & MRS D CLARKE<br>19 LANGWITH GARDENS<br>HOLBEACH<br><br>Telephone: |  | <b>AGENT NAME AND ADDRESS</b><br><br>ADRIAN STERRY-BLUNT<br>MATHESON HOUSE<br>OXCROFT BANK<br>SHEPEAU STOW<br>PE12 0TY<br><br>Telephone:07973152758 |  |
| <b>SITE ADDRESS DETAILS</b><br>19 LANGWITH GARDENS<br>HOLBEACH                                                  |  |                                                                                                                                                     |  |
| <b>CURRENT APPLICATION NO:</b><br>This amendment cannot be considered unless the relevant reference is stated.  |  | PP-09400183v1      H09-0022-21                                                                                                                      |  |
| Building Regulation reference relating to same development (if applicable)                                      |  | B09-0172-21                                                                                                                                         |  |

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, I agree to an extension of the terminal date (if applicable).

Signed:

Date: 21.2.21

|                                                                                                                                                                                          |  |                                                                                                     |         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------|---------|
| <b>FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO</b>                                                                                             |  | SINGLE STOREY REAR EXTENSION                                                                        |         |
| 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) |  | REAR & SIDE ELEVATIONS CORRECTED IN LINE WITH FRONT ELEVATION<br><i>Pitched roof not flat roof.</i> |         |
| State drawing numbers of the current submission                                                                                                                                          |  | o/s plan:      SSK1/6<br>SSK1/1,      SSK1/3<br>SSK1/7,      SSK1/2<br>SSK1/5      SSK1/4           |         |
| Has this amendment been requested by the Council? (If so, state Officer dealing with the application)                                                                                    |  | YES/NO<br>(deleted as appropriate)                                                                  | 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? (If so, state Building Control Surveyor dealing with                                                                  |  | YES/NO<br>(deleted as appropriate)                                                                  | NOT YET |