



PLANNING AMENDME NT

For Office Use only

Application No:

Date Registered:

Case Officer:

(Please complete using block capitals and black ink)

APPLICANT NAME AND ADDRESS MR & MRS D GILBERT CLAYS FARMHOUSE ROMAN BANK HOLBEACH BANK LINGS DE 12 8BX Telephone:	AGENT NAME AND ADDRESS JULIAN WARRICK 8 BEECH GROVE EDNINGTON LINGS DE 11 4XD Telephone: 07849 652067
SITE ADDRESS DETAILS AS APPLICANT.	
CURRENT APPLICATION NO: This amendment cannot be considered unless the relevant reference is stated.	H09-0394-25
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, I agree to an extension of the terminal date (if applicable).

Signed :

JAO

Date:

25 / 6 / 2025.

FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO

~~EXTENSION~~
ALTERATIONS.

<p>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)</p>	<p>AS AGREED WITH SHIBB PIPED DRAIN PLOTTED ON J203-DL13 AND DISTANCES 9 NEW FROM EXISTING & PROPOSED</p>	
<p>State drawing numbers of the current submission</p>	<p>J203-DL12 DL3 DL4</p>	
<p>Has this amendment been requested by the Council? (If so, state Officer dealing with the application)</p>	<p>YES NO</p>	
<p>Describe any part of the original development which is excluded by virtue of the amendment, and state any alteration to plot numbers</p>		
<p>Has a similar amendment been submitted under Building Regulations? (If so, state Building Control Surveyor dealing with application)</p>	<p>YES NO</p>	