PLANNING AMENDMENT

For Office Use only

Application No:

Date Registered:

Case Officer:



(Please complete using block capitals and black ink)

APPLICANT NAME AND ADDRESS

AGENT NAME AND ADDRESS

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Telephone:	Telephone:
SITE ADDRESS DETAILS	
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CURRENT APPLICATION NO:	
This amendment cannot be considered unless	
the relevant reference is stated.	·
Building Regulation reference relating to same	
development (if applicable)	
345	
I attach four copies of this form and necessary pla	ans and request that the changes described below
can be accepted as an amendment. As the amer	ndment relates to a current application.
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Signed:	Date:
Signed:	Date:
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