SALLY WALTHAM
BA (Hons) F.C.I.H.
Director of Housing & Planning Services

Housing and Planning
Services Department,
Council Offices,
Priory Road,
Spalding,
Lincolnshire. PE11 2XE

Telephone: (01775) 761161
Fax: (01775) 710772

FILE COPY

SOUTH HOLLAND DISTRICT COUNCIL
HOUSING & PLANNING SERVICES DEPARTMENT

Application no. H09/0900/00

Applicant: M Chapman & M McConnell
60A Spalding Road
Holbeach
Spalding
Lincs

Agent:
G R Merchant
Unit 4 Wrights Mews
12A Park Road
Holbeach
Spalding Lincs

Description: Erection of a two storey and single storey extension

Location: 60A Spalding Road
Holbeach
Spalding
Lincs

Amendment: Roof lights to rear bedroom
Dwg. No. 044/00/01A and 044/00/02A

07-NOV-00

Dear Sir/Madam

ACKNOWLEDGEMENT OF AMENDMENT

I acknowledge receipt of the amended details in respect of the above and confirm that the changes are able to be incorporated into the application which will now **only be considered in its amended form.**

The terminal date for dealing with the application has now been extended to 22 DEC 2000
Your rights of appeal remain as explained on the original acknowledgement

You are reminded that revision to any submission made under the Building Regulations may also be necessary.

Yours faithfully

Director of Housing and Planning Services

AMENDMENT RECORD SHEET – LIVE APPLICATION

Admin

Validation:

Inadequate/Inappropriate ☐

Clarification/Details required:

Appears valid ☑

Registered 16/2/11

Terminal date/committee updated 22 Dec 7/11

DC Procedural Assessment

Is the information given correct? Yes/No (If No, state above what details are needed)

Has this amendment been requested? Yes/No •
If Yes, is it what was asked for? Yes/No •

Who do you need to reconsult as a result of this amendment? (PC) (WM) Press (Residents) Other – None ☐ 7/11

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:

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

AUTHORISED to treat as amendment

Confirmed: DMF 2/11.

Superseded details removed ☐

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

Acceptance issued: ✓
Public register updated: + Library 7/11

DC Professional Assessment

NOTES:

PLANNING AMENDMENT

For office use only

Application No. H09/0900/00

Date Registered 27 OCT 2000

Case Officer OG

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

M. CHAPMAN & C. McCONNELL.
60A SPALDING ROAD.
HOLBEACH.
SPALDING.
LINCS.

Tel. No.

NAME AND ADDRESS OF AGENT
(if form completed by agent)

G. R. MERCHANT.
UNIT 4. WRIGHTS MEWS.
12A PARK ROAD.
HOLBEACH

Tel. No. 01406 490800 (Contact)

OFFICE COPY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS ABOVE.

Please complete

APPLICATION No.

This amendment **cannot be considered** unless the relevant reference is stated

H09/0900/00.

Building Regulation reference relating to same development (if any)

—

2. Please tick one box only

A — Amendment is proposed where permission already granted. If yes, submit two forms and two plans. [ ]

or

B — Amendment is to a proposal currently being considered. If yes, submit four forms and four plans. [✓]

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 G. R. Merchant Date 26.10.2000

3. Please complete in block letters

FULL DESCRIPTION OF DEVELOPMENT IN ORIGINAL APPLICATION

EXTENSIONS & ALTERATIONS.

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.)

ROOF LIGHTS
REAR BEDROOM.

State drawing no's of the current submission

044/00/01 & 02.

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

YES / ~~NO~~ D. GREENEY.

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