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: ~~H09/0960/99~~

Applicant: L S Hawkins & Son
Chapel Street
Holbeach
Spalding
Lincolnshire PE12 7DJ

Agent:
Richard J Diggle
9 Cassons Close
Weston Hills
Spalding
Lincs PE12 6DX

Description: Non-illuminated fascia signs

Location: Chapel Street
Holbeach
Spalding
Lincolnshire

Amendment: Omission of 22.5m long fascia sign and corner sign (B)
Dwg. No.s 299/01A, 299/02A & 299/03A

04-DEC-99

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 in the application which will now **only be considered in its amended form.**

As a result of the need for the Authority to repeat certain procedures because of the amendment, the period for determining the application has been extended to 14 JAN 2000

Your rights of appeal remain as explained on the original acknowledgement.
If you do not wish to agree to the extended time period and would rather have the application determined more quickly but on the basis of the application as originally submitted, please let me know in writing within the next 5 days.

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 22/11 19/11

Terminal date/committee updated 14 Jan 2000

4/12

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 ☐

Done 4/12

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: DMG 23/11

Superseded details removed ☐

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

Omission of 22.5 m long fascia sign and corner sign (B).

Acceptance issued: ✓

Public register updated: 4/12

DC Professional Assessment

NOTES:

PLANNING AMENDMENT

For office use only

Application No. H09/0960/99

Date Registered 19 NOV 1999

Case Officer OG

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

L S HAWKINS & SON

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

RICHARD J DIGGLE,

Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

CHAPEL STREET, HOLBEACH,

OFFICE COPY

Please complete

APPLICATION No.

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

H09/0960/99

Building Regulation reference relating to same development (if any)

2. Please tick **one** box only

Amendment 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 ..... 19.11.99.....

3. Please complete in block letters

FULL DESCRIPTION OF DEVELOPMENT IN ORIGINAL APPLICATION

NON-ILLUMINATED FASCIA SIGNS.

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.)

SEE ATTACHED LETTER/PLANS.

① 22500mm FASCIA SIGN OMITTED

② CORNER SIGN OMITTED

③ MAIN SIGN MATT FINISH - LETTERING 400mm

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