

PLANNING AMENDMENT

For Office Use only

Application No:

Date Registered:

Case Officer:



(Please complete using block capitals and black ink)

APPLICANT NAME AND ADDRESS Mr and mrs John Heading 4a Gimmels Gate Sutton Crosses Long Sutton PE12 9AS Telephone:		AGENT NAME AND ADDRESS Heal Planning 11 st Marys Place Shrewsbury SY1 1DZ Telephone: 07143 369911	
SITE ADDRESS DETAILS The Shed, 4A Gimmels Gate, Sutton Crosses, Long Sutton, PE12 9AS			
CURRENT APPLICATION NO: This amendment cannot be considered unless the relevant reference is stated.		H11-1294-25	
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.

Heal Planning
Signed :

18th MArch 2026

Date:

FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO	Change of Use of Storage Shed to Residential - Retrospective	
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)	Revised Site plan	
State drawing numbers of the current submission	HP-GGL-01	
Has this amendment been requested by the Council? (If so, state Officer dealing with the application)	YES/NO	YES
Describe any part of the original development which is excluded by virtue of the amendment, and state any alteration to plot numbers	N/A	
Has a similar amendment been submitted under Building Regulations? (If so, state Building Control Surveyor dealing with application)	YES/NO	N/A