

PLANNING AMENDMENT

For Office Use only

Application No:

Date Registered:

Case Officer:



(Please complete using block capitals and black ink)

APPLICANT NAME AND ADDRESS Moulton Medical Centre C/O Dr Dias High Street Moulton PE12 6QB Telephone: [REDACTED]	AGENT NAME AND ADDRESS Helen Raymond RAW architecture ltd 3 College Close Great Casterton PE9 4AW Telephone: 01780 766 660
SITE ADDRESS DETAILS Moulton Medical Centre High Street Moulton PE12 6QB	
CURRENT APPLICATION NO: This amendment cannot be considered unless the relevant reference is stated.	H13-0544-23
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.	
H Raymond	24.10.23
Signed :	Date:

FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO	Part two storey, part single storey, rear and side extension to medical centre	
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)	shadow study produced showing existing and proposed solar shading throughout the year	
State drawing numbers of the current submission	0382_ A3_Shadow Study_monthly_existing and proposed_revA	
Has this amendment been requested by the Council? (If so, state Officer dealing with the application)	YES/NO	Catherine Sutton
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? (If so, state Building Control Surveyor dealing with application)	YES/NO	N/A