

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 S FRANKS COPSON COTTAGE MAIN STREET BROUTING THORPE LUTTERWORTH Telephone: LE17 5 QF		AGENT NAME AND ADDRESS BRIAN GILHAM STATUS DESIGN 2 EDINBURGH WALK HOLBEACH SPALDING PE12 7AP Telephone: 01406 424343	
SITE ADDRESS DETAILS KINGFISHER, SMALL DRIVE, WEST PINCHBECK PE11 3NL			
CURRENT APPLICATION NO: This amendment cannot be considered unless the relevant reference is stated.		H14- 0865-19	
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.

Signed: *Status Design*

Date: 2-12-19

FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO			
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)		AS PER TOUR REQUIREMENTS	
State drawing numbers of the current submission		SD19-029 / 1	
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? (If so, state Building Control Surveyor dealing with application)		YES/NO	