

# PLANNING AMENDMENT

## For office use only

Application No.

H14/1054/99

Date Registered

24 DEC 1999

Case Officer

1. Please complete in block letters

### NAME AND ADDRESS OF APPLICANT

ALLISON HAMES

Tel. No.

### NAME AND ADDRESS OF AGENT

(if form completed by agent)

R. ROUGHTY CONSULT.

Tel. No.

(Contact)

OFFICE  
COPY

Please complete in block letters

### FULL POSTAL ADDRESS OF THE APPLICATION SITE

LAND OFF HORSEPAT LANE  
PINCHBECK

Please complete

### APPLICATION No.

This amendment cannot be considered  
unless the relevant reference is stated

H14/1054/99

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.



or -

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 ..... Date .....

3. Please complete in block letters

### FULL DESCRIPTION OF DEVELOPMENT IN ORIGINAL APPLICATION

ERECTION OF 4  
BUNGALOWS

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 LAYOUT

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

# AMENDMENT RECORD SHEET - LIVE APPLICATION

## Admin

Validation:

Inadequate/Inappropriate

Clarification/Details required:

Appears valid

Registered

Terminal date/committee updated

## DC Procedural Assessment

Is the information given correct?

Yes/No (If No, state above what details are needed)

Has this amendment been requested?  
If Yes, is it what was asked for?

Yes/No \*  
Yes/No \*

Who do you need to reconsult as a result of this amendment?

PC  
WM  
Press  
Residents  
Other -

None

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: *22/6/11*

Notes/Advice/Rejection Reason:

*Revised After Decision taken to Refuse Re application*

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

AUTHORISED to treat as amendment

Confirmed: .....

Superseded details removed

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

Acceptance issued:  
Public register updated:

## DC Professional Assessment

NOTES: