

PLANNING AMENDMENT

For office use only

Application No. **H15/168/01**
 Date Registered **09 JUL 2001**
 Case Officer **DA**

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR G SEVERN

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

Tel. No.

(Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

6 ST MARGARETS, MAIN ROAD.

Please complete

APPLICATION No.

This amendment cannot be considered unless the relevant reference is stated

H15/0168/01.

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

3. Please complete in block letters

FULL DESCRIPTION OF DEVELOPMENT IN ORIGINAL APPLICATION

THREE BED DETACHED HOUSE WITH SINGLE ATTACHED GARAGE

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.)

AMEND GARAGE TO NOW DETACHED HOUSE + GARAGE SET BACK ONE METRE FROM NEXT DOOR BUILDING LINE

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 - POST DECISION

Admin

Validation:

Inadequate/Inappropriate

☐

Clarification/Details required:

Appears valid

☒

Registered

.....

DC Procedural Assessment

Is the information given correct?

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

Is it an amendment in principle?

Immaterial/Needs new app

Confirmed:

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

Acceptance issued:



TITLE NUMBER
LL191982

LINCOLNSHIRE : SOUTH HOLLAND



ICE SURVEY MAP REFERENCE:

TY2233SE

SCALE 1:1250 Enlarged from 1:2500

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**SOUTH HOLLAND DC
HOUSING & PLANNING**

15-9 JUL 2001

Ref:

168/07
5557/01

Sewage
Pumping
Station

Garage

ST MARGARET'S

A12

A12

A12

Drain

MR. R. SEVERN & MR. M. BOTTOM

LAND AT 6 ST. MARGARET'S, MAIN ROAD, QUADRING

LOCATION PLAN

**DETERMINED
PLAN**

