

# PLANNING AMENDMENT

**For Office Use only**

Application No:

Date Registered:

Case Officer:



(Please complete using block capitals and black ink)

|                                                                                                                |                               |
|----------------------------------------------------------------------------------------------------------------|-------------------------------|
| <b>APPLICANT NAME AND ADDRESS</b>                                                                              | <b>AGENT NAME AND ADDRESS</b> |
| MR & MRS WEST.<br>PARK HOUSE,<br>PARK LANE,<br>SURFLEET,<br>LINCOLNSHIRE.<br>PE11 4AF.                         | N/A                           |
| Telephone: [REDACTED]                                                                                          | Telephone: N/A                |
| <b>SITE ADDRESS DETAILS</b>                                                                                    |                               |
| PARK HOUSE,<br>PARK LANE,<br>SURFLEET,<br>LINCOLNSHIRE.<br>PE11 4AF.                                           |                               |
| <b>CURRENT APPLICATION NO:</b><br>This amendment cannot be considered unless the relevant reference is stated. | H17-0797-19                   |
| Building Regulation reference relating to same development (if applicable)                                     | N/A                           |

|                                                                                                                                                                                                                                                      |                |
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| 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, I agree to an extension of the terminal date (if applicable). |                |
| Signed: [REDACTED]                                                                                                                                                                                                                                   | Date: 30/10/19 |

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>FULL DESCRIPTION OF DEVELOPMENT OF CURRENT APPLICATION THAT THIS AMENDMENT RELATES TO</b>                                                                                                | Change of use of private swimming pool to swimming pool for private hire, exclusive for family groups of up to 6, babies, rehabilitation and certain disabilities.                                                                                                               |
| State details of amendments proposed.<br>(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) | <p>Opening hours – Amended to Monday/Friday 10am till 8pm, and Saturday/Sunday 9am till 6pm.</p> <p>Parking – To be accommodated solely on our main house drive and the swimming pool drive. This would provide off-road parking for up to 6 vehicles should it be required.</p> |
| State drawing numbers of the current submission                                                                                                                                             | N/A                                                                                                                                                                                                                                                                              |

|                                                                                                                                      |        |                   |
|--------------------------------------------------------------------------------------------------------------------------------------|--------|-------------------|
| Has this amendment been requested by the Council? (If so, state Officer dealing with the application)                                | YES/NO | YES – David Grant |
| 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               |