PLANNING AMENDMENT

For office use only

Application No. H20/0161/95

Date Registered 03 APR 1995

Case Officer DG

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

T. W. Roffe and Sons,
46, Chapel Gate,
SUTTON St. JAMES,
Spalding.

Tel. No.

NAME AND ADDRESS OF AGENT
(if form completed by agent)

Building Design and Plans
A. ROFFE - 1, Green Lane,
SPALDING, Lincs. PE11 2YB
Tel: 0775 - 723680

Tel. No.

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

Chapel Gate, SUTTON St. JAMES.

Please complete

APPLICATION No.

This amendment **cannot be considered** unless the relevant reference is stated

H20/0161/95

Building Regulation reference relating to same development (if any)

N/A.

2. Please tick **one** box only

A — Amendment is proposed where permission already granted. If yes, submit two forms and two plans. [ ]

or

B — 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 T. W. Roffe Date 28th March 1995

3. Please complete in block letters

FULL DESCRIPTION OF DEVELOPMENT IN ORIGINAL APPLICATION

Condition Compliance,
Details of Extraction System.

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.)

Repositioning of flue to system.

State drawing no's of the current submission

revision dated 28/3/95 Plan and Side Elevation

Has this amendment been requested by the Council? (If so, state Officer dealing with the application)

YES / NO — Mr. D. Gedney.

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? YES / No

SOUTH HOLLAND DISTRICT COUNCIL

Application no: H20/0161/95

Applicant: T W Roffe & Son
46 Chapel Gate
Sutton St James
Spalding
Lincs

Agent: A Roffe
Building Design & Plans
1 Green Lane
Spalding
Lincs PE11 2YB

Description: Details of fume extraction system (Condition 2 of application H20/0721/94)

Location: Chapel Gate
Sutton St James
Spalding
Lincs

Amendment: Reposition flue to system (revision dated 28/3/95)

10-APR-95

Dear Sir/Madam

ACKNOWLEDGEMENT OF AMENDMENT

I acknowledge receipt of the amended details in respect of the above proposal. These have been incorporated into the application which will now only be considered in its amended form.

The terminal date for dealing with the application has now been extended to 29-MAY-95, based on the date of receipt of the amendment, and your rights of appeal remain as explained on the original acknowledgement.

You are reminded that revision to any submission made under the Building Regulations may also be necessary.

Yours faithfully

Director of Housing and Planning Services

MRS SALLY WALTHAM BA (Hons) F.C.I.H. Director of Housing & Planning Services

Housing & Planning Services Department, Council Offices, Priory Road, Spalding, Lincolnshire. PE11 2XE (Tel: 01775 761161)

AMENDMENT RECORD SHEET – LIVE APPLICATION

Admin

Validation:

Inadequate/Inappropriate ☐

Clarification/Details required:

Appears valid ☑

Registered 10/4/18

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? Yes/No *
If Yes, is it what was asked for? Yes/No *

Who do you need to reconsult as a result of this amendment? None ☑
PC
WM
Press
Residents
Other –

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: .....

Notes/Advice/Rejection Reason:

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

AUTHORISED to treat as amendment

Confirmed: DMS 10/4

Superseded details removed ☑

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

Acceptance issued: ✓
Public register updated: ✓ SS 11/4

DC Professional Assessment

NOTES: