# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

**For office use only**
Application No. H01/1019/00
Date registered
Grid reference 17 AUG 2000

1. Please complete in block letters

**NAME AND ADDRESS OF APPLICANT**

BLOADGATE HOMES LTD
BLOADGATE HOUSE, BLOADGATE,
WESTON HILLS, SPALDING,
LINCS. PE12 6DB
Tel. No. 01406 380532

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

OFFICE COPY

Tel. No. (Contact)

Please complete in block letters

**FULL POSTAL ADDRESS OF THE APPLICATION SITE**

BACKGATE (ADJ 43 & 49 BACKGATE) COWBIT, SPALDING. LINCS

Please complete

**EARLIER APPLICATION No.**

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

H01/0883/99

Please complete

I attach the necessary plans and apply for approval as described below

Signed ..... Date 16 AUGUST 2000

Please complete the section below.

**This form is for approval of additional details.** For approval of reserved matters you should not use this form -- ask for Planning Application forms.

If a condition restricts activity in some way, and you wish to remove that restriction, you should not use this form -- ask for Planning Application forms.

If a condition requires activity to be carried out in a certain way, you do not normally need to apply for approval, unless the condition specifically requires it.

2. The application is for approval of details required by a condition (✓) ✓

State which details are submitted: DETAILED DRAWINGS

State drawing no's relating to the current submission: 00-31-04, 00-31-02-B, 00 31-03, 98022/5L

State condition no. under which this application is required: 3