

CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only

Application No. H 03/0337/01

Date registered 20 MAR 2001

Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR & MRS M. ZIMMERMANN
14, THE PASTURES,
SOMERSHAM,
CAMBS
Tel. No -

NAME AND ADDRESS OF AGENT

(if form completed by agent)

LANGWITH DESIGN ASSOCIATES,
72, CHURCH STREET,
HOLBEACH, SPALDING, Lincs PE12 7UL

Tel. No.
(01456) 425766

(Contact) TONY HICKS.

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

BRICKYARD COTTAGES, MAIN STREET, DEEPING ST. NICHOLAS
SPALDING, LINCOLNSHIRE.

Please complete

EARLIER APPLICATION No.

This application cannot be considered unless the relevant reference is stated

H 03/0314/00

Please complete

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

Signed



A.D. Hicks.

Date

20/03/01

Please complete the section below.

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

If a condition restricts activity in some way, and you wish to remove that restriction, you should not use this form - see 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

LANDSCAPING DETAILS

State drawing no's relating to the current submission

LDA/028/01

State condition no. under which this application is required

No 3