CONDITION COMPLIANCE APPLICATION

OFFICE COPY

4 COPIES OF FORM AND PLANS REQUIRED

For office use only

Application No. H04/0480/01

Date registered 20-04-01

Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

J. P. BUILDERS
21. LOVE LANE
SPALDING
LINCS
PE11 2PF

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

COOPER ARCHITECTURAL DESIGN.
UNIT A. WRIGHTS MEWS 12A PARK RD
HOLBEACH
SPALDING. LINCS

Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

REAR of 49 STATION STREET. DONINGTON
SPALDING LINCS

Please complete

EARLIER APPLICATION No.

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

H04/0189/01

Please complete

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

Signed ..... Date 19-04-01

Please complete the section below.

This form is for approval of additional details. For approval of reserved matters you should not use this form – 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

OPENINGS 9 & 10 TO BE FIXED
NO TRICKLE VENTS TO PLOT 1

State drawing no's relating to the current submission 0020:01.

State condition no. under which this application is required 1