

# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

## For office use only

Application No.

Date registered

Grid reference

1404/0834/90  
05 SEP 1996

1. Please complete in block letters

### NAME AND ADDRESS OF APPLICANT

M. A. CRAVEN (DONINGTON) LTD.

PARK FARM  
DONINGTON  
SPALDING  
Lincs

PE11 4UJ

TEL: 01775 820239

Tel. No.

### NAME AND ADDRESS OF AGENT

(if form completed by agent)

Tel. No.

(Contact)

Please complete in block letters

### FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS ABOVE

OFFICE  
COPY

Please complete

### EARLIER APPLICATION No.

This application cannot be considered  
unless the relevant reference is stated

1404/0603/96

Please complete

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

Signed

M. A. Craven

Date

30/8/96

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

2. Tree Planting

State drawing no's relating to the current submission

ONE

State condition no. under which this application is required

2.