CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H04/0878/00.
Date registered
Grid reference 12 1111 2000

1. Please complete in block letters
NAME AND ADDRESS OF APPLICANT
MR + MRS G R LUNN

Tel. No.

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

Tel. No. (Contact)

Please complete in block letters
FULL POSTAL ADDRESS OF THE APPLICATION SITE
PLOT 2, OFF PARK LANE, DAVINGTON.

Please complete
EARLIER APPLICATION No.

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

OFFICE COPY 17/8/99

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

Signed ..... Date 14/7/2000

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

ARCHAEOLOGICAL WATCHING BRIEF.

State drawing no's relating to the current submission

State condition no. under which this application is required

COND. 2.