CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

OFFICE COPY

For office use only

Application No. H05/1218/01.

Date registered 17 OCT 2001

Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

HERON COTTAGE LEISURE SERVICES,
HERON COTTAGE,
FROSTLEY GATE, HOLBEACH FEN,
SPALDING, LINCS PE12 8SR

Tel. No. 01406 540435

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

N/A

Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

LAND WEST SIDE OF FROSTLEY GATE, (FIELD O.S No. 1846)
HOLBEACH FEN, SPALDING, LINCS

Please complete

EARLIER APPLICATION No.

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

H05/0966/99

Please complete

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

Signed ..... Date 16TH OCTOBER 2001

PARTNER.

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

DETAILS AS CONDITIONS NOS 1 TO 8 - AS APPROVAL DATED 4TH JANUARY 2000

State drawing no's relating to the current submission

1 No. DRAWING SCALE:- 1:500

State condition no. under which this application is required