CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H08/1175/00
Date registered 25 SEP 2000
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR. D. HEWITT
LABURNUM COTTAGE
WEST LANE
QUADRING, EAUDYKE
Tel. No. SPALDING LINCS

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

COOPER ARCHITECTURAL DESIGN,
UNIT 4, WRIGHTS MEWS
20 PARK ROAD
HOLBEACH, SPALDING LINCS
Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

QUADRING ROAD, GOSBERTON SPALDING, LINCS.

Please complete

EARLIER APPLICATION No.

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

H08/0667/99

Please complete

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

Signed ..... Date 22/9/00

OFFICE COPY

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

ACOUSTIC FENCE
ACCOUSTIC VENTS

State drawing no's relating to the current submission —

State condition no. under which this application is required 4.