

# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

## For office use only

Application No.

Date registered

Grid reference

H09/1240/97

25 NOV 1997

1. Please complete in block letters

### NAME AND ADDRESS OF APPLICANT

M LYLES  
HIGH ROAD  
WHARFODE  
SPALDING

Tel. No. LINES

### NAME AND ADDRESS OF AGENT

(if form completed by agent)

CHOPPER ARCHITECTURAL DESIGN  
ROCKLESGATE, FLEET  
SPALDING, Lincs

Tel. No. 01406 423760 (act)

Please complete in block letters

### FULL POSTAL ADDRESS OF THE APPLICATION SITE

BATTLEFIELD LANE, HOLBEACH Lincs

Please complete

### EARLIER APPLICATION No.

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

H09/0932/96

Please complete

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

Signed

Date

20-11-97

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

BRICK BUTTERLY KIMBOSTON RED  
TILE SANDTCHT DOBBLE PANTILE  
SMOOTH RED  
TO PLOTS 2, 3, 4, 5 & 6

State drawing no's relating to the current submission

State condition no. under which this application is required

3.