

CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

H13/1134/98

16 NOV 1998

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

DGM PROPERTIES LTD.
43 DOUBLE STREET.
SPALDING.
Lincs.

Tel. No.

NAME OF APPLICANT

(If for a business)

G. R. MERCHANT.
UNIT 14. WRIGHTS NEWS.
12A PARK ROAD.
HOLBEACH.

Tel. No. 01406 490800

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

PLOT 9. CHAPEL GARDENS. (OFF ROMAN ROAD)
MOULTON CHAPEL.

Please complete

EARLIER APPLICATION No.

This application cannot be considered
unless the relevant reference is stated

OFFICE
COPY

H13/0902/98

Please complete

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

Signed

G. R. Merchant

Date

12.11.98

Please complete the section below

This form is for approval of details required by a condition. For approval of details, use this form — ask for Planning Application forms.

If a condition restricts activity in some way, and you wish to remove or restrict it, use this form — ask for Planning Application forms.

If a condition requires activity to be carried out in a certain way, you do not 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

FENCING SCHEME to
EASTERN BOUNDARY
OF SITE.

State drawing no's relating to the current submission

DGM-MC 2/3.

State condition no. under which this application is required

3.