CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H1S/0833/00
Date registered 30 JUN 2000
Grid reference

1. Please complete in block letters
NAME AND ADDRESS OF APPLICANT

ANDREW KING
67 WATERGATE, QUADRING,
SPALDING, LINCS. PE11 4PY.
Tel. No. 01775 822023

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

Tel. No. (Contact)

Please complete in block letters
FULL POSTAL ADDRESS OF THE APPLICATION SITE

FIELD 0087 WATERGATE, QUADRING, SPALDING, LINCOLNSHIRE

Please complete
EARLIER APPLICATION No.

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

H1S/0199/00.

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

Signed A. King Date 30/06/00

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

COND. 2 – LANDSCAPING + TREE PLANTING.

COND. 4 – PARKING PROVISION ETC.

State drawing no's relating to the current submission

State condition no. under which this application is required 2 + 4