

CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only

Application No.

Date registered

Grid reference

H16/0088/95

30 JAN 1995

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR. & MRS D. WILSON
30/32 ALBION STREET
SPALDING,
Lincs, PE11 2AJ.
Tel. No. 01775 760443.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

RICHARD J. DIGGLE
OAK HOUSE, VICARAGE CLOSE,
HOLBEACH ST. JOHNS,
SPALDING, Lincs, PE12 8RG.
Tel. No. 01406 (Contact)
540376.

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

PLOT 1, EAST ROAD (SOUTH DRIVE)
LUCK'S BRIDGE, SPALDING, Lincs.

Please complete

EARLIER APPLICATION No.

This application cannot be considered
unless the relevant reference is stated

H16/0361/94

&

H16/1153/94. H16/1153/94

Please complete

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

Signed

Date

24 JANUARY 1995.

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

LANDSCAPING AND
TREE PLANTING.

State drawing no's relating to the current submission

200 - 2B.

State condition no. under which this application is required

4 + 2