# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

**For office use only**
Application No. H16/0163/95
Date registered 16 FEB 95
Grid reference

1. Please complete in block letters

**NAME AND ADDRESS OF APPLICANT**

mr. C.A. Tarhan
54 Horn Park Lane
London SE12

Tel. No.

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

mr O. Sedat MSST.
7 York Gate
Southgate, London
N14 6HS.

Tel. No. 081 886 5266 (Contact)

Please complete in block letters

**FULL POSTAL ADDRESS OF THE APPLICATION SITE**

41 High Street, Spalding

Please complete

**EARLIER APPLICATION No.**

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

H16/1084/94

Please complete

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

Signed ..... Date .....

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: Details of sound attenuation measures

State drawing no's relating to the current submission: 94/HR2

State condition no. under which this application is required: 2