# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

**For office use only**
Application No. H16/0210/95
Date registered 27 FEB 1995
Grid reference

1. Please complete in block letters

**NAME AND ADDRESS OF APPLICANT**

Lincoln Co-op
Stanley Betts House
15-23 Tentercroft St
Lincoln
Tel. No.

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

Brian E Wright
Croyland
15 High St Posslingbrough
Lincoln
Tel. No. (Contact)

OFFICE COPY

Please complete in block letters

**FULL POSTAL ADDRESS OF THE APPLICATION SITE**

Lincoln Co-op, Wisbech Road, Spalding

Please complete

**EARLIER APPLICATION No.**

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

H16/0870/94

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

See letter

State drawing no's relating to the current submission

State condition no. under which this application is required 4