CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H16/0293/02
Date registered 12 MAR 2002
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

LONGHURST HOUSING

Tel. No.

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

SAUNDERS BOSTON

Tel. No. (Contact)

OFFICE COPY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

23 HAWTHORN BANK, SPALDING

Please complete

EARLIER APPLICATION No.

H16/1156/00

This application cannot be validated unless the relevant reference is given

Please complete

I attach the details and plans which are submitted for approval as described below

Signed Date

Please read the following notes before completing this form

This form is for the submission of details for the approval of reserved matters you should not use this form if the condition you wish to remove that restriction, you should not use this form

If a condition does not specify in any certain way, you do not normally need to apply for approval of details pursuant to that condition

2. The application is for approval of details required by a condition (✓) ✓

State which details are submitted

EXTERNAL WORKS PLAN

State drawing no's relating to the current submission

State condition no. under which this application is required COND. 11