CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

OFFICE COPY

For office use only
Application No. H16/0487/97
Date registered
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Lincolnshire Housing Association Ltd
Friars House,
Manor Lane,
Boston, Lincs. PE21 6QZ
Tel. No.

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

BROADGATE BUILDERS (SPALDING) LTD.
BROADGATE HOUSE
WESTON HILLS
SPALDING
LINCS. PE12 6DB
Tel. No. 01406 380532 (Contact) S. Liquorish

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

No's 34-36, Double Street, Spalding, Lincs.

Please complete

EARLIER APPLICATION No.

H16/0551/96.

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

Please complete

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

Signed S. Liquorish Date 1st May 1997

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

Schedule of External Finishes

State drawing no's relating to the current submission

2004

State condition no. under which this application is required

Condition 5 (ii)