

CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only

Application No. H16/0537/97

Date registered

14 MAY 1997

Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

LONGHURST HOUSING ASSOCIATION Ltd.
PRIARS HOUSE,
QUAKER LANE,
BOSTON, Lincs. PE21 6DZ.
Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

BROADGATE BUILDERS (SPALDING) LTD.
BROADGATE HOUSE
WESTON HILLS
SPALDING

Tel. No. Lincs. PE12 6DB (Contact) S. LIQUORISH
01406 380532

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.

This application cannot be considered unless the relevant reference is stated

H16/0551/96

Please complete

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

Signed

S. Liquorish

Date

14th May 1997

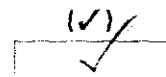
Please complete the section below.

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

DETAILS OF REAR GARDEN
wall

State drawing no's relating to the current submission

05024

State condition no. under which this application is required

Condition no. 5.