CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

COPY

For office use only
Application No. H1610616103
Date registered 14 MAY 2003
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Mr. and Mrs. R. G. Sharman,
8, Tower Lane,
SPALDING
PE11 2RG

Tel. No.

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

BUILDING DESIGN and PLANS

ALWYN ROFFE,
1, Green Lane,
SPALDING, Lincs. PE11 2YB
tel : 01775 - 723 680

Tel. No.

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

"Langton House", 4, Cowbit Road, SPALDING

Please complete

EARLIER APPLICATION No.

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

H16/1292/02

Please complete

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

Signed ..... Date 14th May 2003

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: Roof Construction

State drawing no's relating to the current submission	230514
State condition no. under which this application is required	2