CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

H16/0655/98

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

BROADGATE BUILDERS (SPALDING) LTD.
BROADGATE HOUSE
WESTON HILLS
SPALDING
LINCS. PE12 6DB

Tel. No 01406 380532

NAME AND ADDRESS OF AGENT (if any)

BROADGATE BUILDERS (SPALDING) LTD.
BROADGATE HOUSE
WESTON HILLS
SPALDING
LINCS. PE12 6DB

Tel. No

S LIQUORISH.

OFFICE COPY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

PHASE 1 DISTRIBUTOR ROAD, OFF BOURNE ROAD, SPALDING

Please complete

EARLIER APPLICATION No.

This application cannot be considered unless the relevant reference is stated

H16/0473/95

Please complete

I attach the necessary plans and apply for approval

Signed S. Liquorish

Date 24th JUNE 1998.

Please complete the section below

This form is for approval of additional details. You should not use this form to ask for Planning Application forms.

If a condition requires details to be submitted in some way and you wish to do not use this form to ask for Planning Application forms.

If a condition requires details to be submitted in a certain way for approval, unless the circumstances specifically require it.

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

State which details are submitted

FENCING DETAILS TO SIDE & REAR OF No 99 BOURNE ROAD, SPALDING.

State drawing no's relating to the current submission

NOT KNOWN

State condition no. under which this application is required

CONDITION No. 2.