CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H16/0844/94
Date registered 01 SEP 1994
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Guardian Assurance plc
Royal Exchange
London EC3

Tel. No.

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

GRE Properties Ltd
17 Bruton Street
London W1X 7AH

Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

The White Hart, Market Place, Spalding, Lincs

OFFICE COPY

Please complete

EARLIER APPLICATION No.

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

H16/1152/93

Please complete

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

Signed ..... Date 1 Sep 94

Please complete the section

Sample Available

This form is for approval of served matters you should not use this form – ask for Plan

If a condition restricts activi move that restriction, you should not use this form – ask for

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

Sample of pattress Plate

State drawing no's relating to the current submission

State condition no. under which this application is required 3