CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H16/0852/96
Date registered 12 SEP 1996
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

WILKINSON GROUP OF COMPANIES
P O BOX 20 ROEBUCK WAY MANTON WOOD
WORKSOP, NOTTS S80 3YY

Tel. No. 01909 505505

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

OLDROYD ASSOCIATES
THE COACH HOUSE, 119 KING STREET
ALFRETON DERBYSHIRE DE55 7DE

Tel. No. 01773 833899 (Contact) Mrs Oldroyd

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

UNIT 1, HOLLAND MARKET, SPALDING

Please complete

EARLIER APPLICATION No.

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

H16 0087 96

Please complete

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

Signed C.L.Oldroyd Oldroyd Associates Date 11.9.96

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	YES

State which details are submitted

Entrance and Exit Screens, sidelights and transoms, Bronze anodised aluminium frames with clear glazing. Automatic electrically operated sliding entrance/ exit doors. Shop windows bronze anodised aluminium frames with clear glazing

State drawing no's relating to the current submission	Oldroyd Associates Drgs 95.26.23A and 25B
State condition no. under which this application is required	Condition No. 12