CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H16/1336/02
Date registered 06 DEC 2002
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Thornfield Properties Plc
32 Park Square West
Leeds
LS1 2PF
Tel. No.

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

Gifford + Partners Ltd
20 Nicolas Street
Chester CH1 2NX
Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

Springfields Gardens, Camel Gate, Spalding

Please complete

EARLIER APPLICATION No.

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

H16/0569/98	OUT.	Condn 11
H16/0177/02	OUT.	Condn 5
H16/0360/02	Full.	Condn 5
~~H16/0361/02~~	~~Rm~~	

Please complete

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

Signed ..... Date .....

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

Archaeology Investigation Scheme.

State drawing no's relating to the current submission

State condition no. under which this application is required