CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H17/0360/00
Date received 27 MAR 2000
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR & MRS M. PARKINSON
C/O PODDINGTONS

OFFICE COPY

Tel. No.

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

PODDINGTONS
44 DOUBLE ST
SPALDING
LINCS

Tel. No. 761856 (Contact) R. BOOR

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

RESERVOIR ROAD, SUTTERTON, SPALDING, LINCS.

Please complete

EARLIER APPLICATION No. H17-1188-99

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

Please complete

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

Signed R PODDINGTONS Date 23-3-2000

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

SAMPLES OF BRICK & TILE.
LANDSCAPING
DRAINAGE (FOUL)

State drawing no's relating to the current submission	2921-11 REV A MS-1216
State condition no. under which this application is required	2, 4, 6