CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H19/0737/02
Date registered 24 JUN 2002
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT
Mr & Mrs Strickland
1 Magazine Lane
Wisbech
Cambs.
Tel. No.

NAME AND ADDRESS OF AGENT
(if form completed by agent)
R. C Murray
17 Woodlands Gardens
North Wootton
Kings Lynn
Tel. No. (Contact) PE30 3Px

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE
Plot at Romany Rye, South Eau Bank, Throckenholt

Please complete

EARLIER APPLICATION No. H19/1171/01

This application cannot be considered unless the relevant reference is stated

OFFICE COPY

Please complete

[illegible] the necessary plans and apply for approval as described below

Sign: Gillian Smith Date: 24.6.02

[illegible]

[illegible] approval of additional details [illegible] not [illegible]

[illegible] should [illegible]

[illegible] need to apply [illegible]

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

State which details are submitted Percolation Test Report

State drawing no's relating to the current submission

State condition no. under which this application is required 6