# CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

**For office use only**
Application No. H22/0311/97.
Date registered 20
Grid reference

1. Please complete in block letters

**NAME AND ADDRESS OF APPLICANT**

LINGARDEN LIMITED,
STONEGATE, WESTON,
SPALDING,
LINCOLNSHIRE. PE12 6HP
Tel. No. 01406 370544

**NAME AND ADDRESS OF AGENT**
(if form completed by agent)
JOHN ROBERTS ARCHITECTS LIMITED,
1 JAMES STREET,
LINCOLN.
LN2 1QD
Tel. No 01522 533441 (Contact)

Please complete in block letters

**FULL POSTAL ADDRESS OF THE APPLICATION SITE**

STONEGATE, WESTON
SPALDING, LINCOLNSHIRE.

OFFICE COPY

Please complete

**EARLIER APPLICATION No.**

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

H22/0951/96

Please complete

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

Signed JOHN ROBERTS ARCHITECTS LIMITED Date 19.03.97

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

DETAILS OF STONEGATE IMPROVEMENTS AND WIDENING

State drawing no's relating to the current submission

ALLOTT & LOMAX DRAWINGS NOS. 62354/A/01A,02, 03A, SK01A, SK02, SK03, Sk04, SK05, SK06 & SK07

State condition no. under which this application is required NO.4