

CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only

Application No. H23/0596/95

Date registered

06 JUN 1995

Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR. D. WOOD
WHARFODE MANOR
MANOR HOUSE ROAD
SARACENS HEAD
Tel. No. SPALDING Lincs

NAME AND ADDRESS OF AGENT

(if form completed by agent)

PODDINGTONS
44 DOUBLE STREET
SPALDING Lincs PE11 2AB
Tel. No. 01775 761856 (Contact) J CRUNKHORN

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

WHARFODE MANOR, MANOR HOUSE ROAD
SARACENS HEAD SPALDING LINCOLNSHIRE.

OFFICE
COPY

Please complete

EARLIER APPLICATION No.

H23/0181/95

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

Date

5/6/95

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

COND. ② — DETAILS OF PROPOSED ROOF TILE.
— "RIVENDALE" BLUE/BLACK MAN-MADE SLATES BY ETERNIT UK LTD

State drawing no's relating to the current submission

2614/1B

State condition no. under which this application is required

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