CONDITION COMPLIANCE APPLICATION

4 COPIES OF FORM AND PLANS REQUIRED

For office use only
Application No. H23/0642/96
Date registered 12 JUL 1996
Grid reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

CAROLINE NEWMAN
THE OLD VICARAGE,
WHAPLODE LINCS PE12 6TD

Tel. No. 01406 371594

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

Tel. No. (Contact)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

AS ABOVE

OFFICE COPY

Please complete

EARLIER APPLICATION No.

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

H23/0546/94

Please complete

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

Signed Caroline Newman Date July 9th '96

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 to be submitted by Mr Healey – Heritage Lincolnshire.
See attached letter.

State drawing no's relating to the current submission 2550

State condition no. under which this application is required COND. 5.