PLANNING APPLICATION

H23/0991/98.

- 6 OCT 1998

1 Please complete in block letters

NAME AND ADDRESS OF APPLICANT

Mrs. Janette Hilliam
6 Cobgate
Whaplode
Spalding
PE12 6RP

Tel No. 01406 370063

OFFICE COPY

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

6 Cobgate Whaplode Spalding Lincs PE12 6RP

Please complete in block letters

DESCRIPTION OF PROPOSED DEVELOPMENT

Siting of caravan for tempory living accomodation

Please complete

£190.00

Signed J Hilliam Date 10th Sept. 1998

Please tick **one** box and answer the extra questions

2. **TYPE OF APPLICATION**

This is a **full** application for change of use and/or ✓

or This is an **outline** application

Please state Site Area

Please tick **any** box where you are including in this application

Siting Design

Means of Access

Now complete Parts 3 and 5 and an Ownership

or This is a **reserved matters** application

A. Please state Reference Number of outline
B. Please state which reserved matters are in this application

Now complete Part 4 only

or This is an application for **renewal** of temporary or **continuation** without complying with planning

A. Please state reference Number of previous
B. Please state Condition Number referred to

Now complete an Ownership Certificate

or This is an application for **modification** of a condition planning permission which has not yet been implemented

A. Please state Reference Number of previous
B. Please state Condition Number referred to
C. Please state variation required

Now complete an Ownership Certificate

(if more boxes)

☐ If so, how many:

✓

hectares

sq. metres

metres

18ft metres

10ft metres

Garden Area

✓

✓

N/A

✓

NO ☐ Yes please give details in Part 6

NO

NO

NO

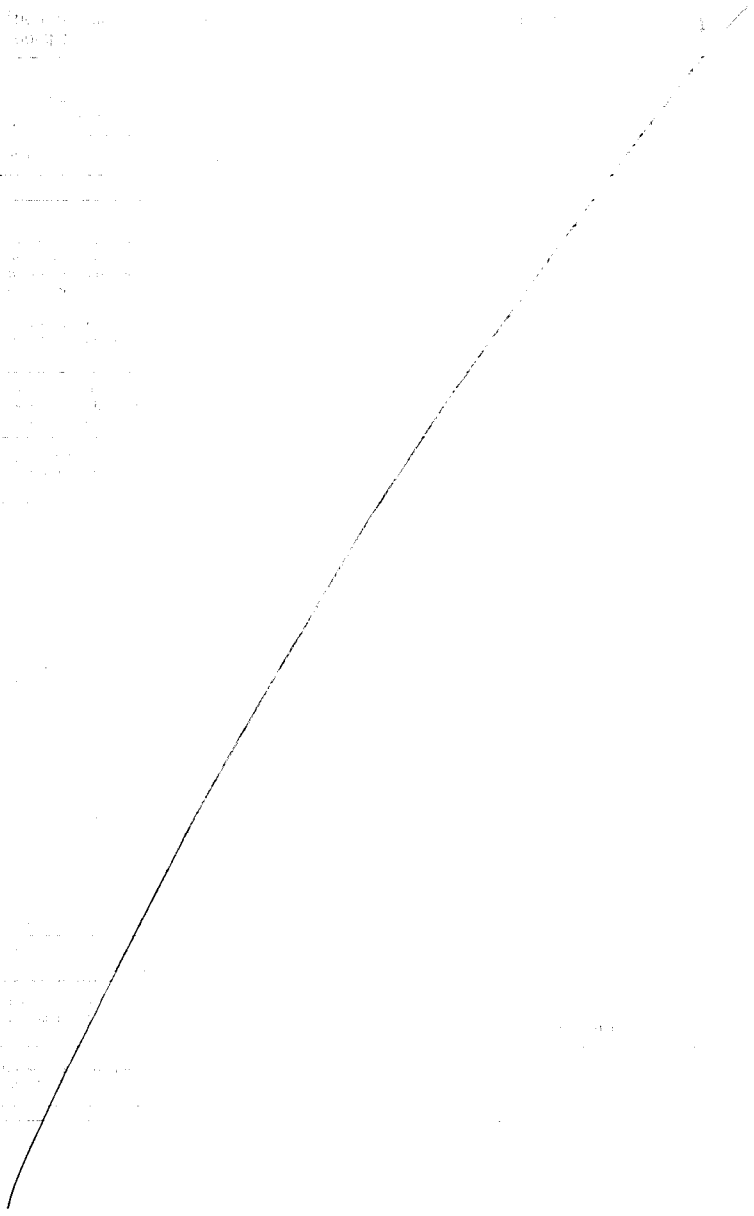
NO ☐ If so, please complete Part 7

☐ Name

Full postal address

☐ Applicant's Tel

of your application.



OWNERSHIP CERTIFICATES

PLEASE COMPLETE ALL THREE SECTIONS.

owner

Certificate B.

J Hillam 10/9/98

J Hillam 10th Sept 98