Please read the notes overleaf before completing any part of this form

Application for consent to display an advertisement

Town and Country Planning Act 1990
Town and Country Planning
(Control of Advertisements) Regulations 1992

Application No.	For official use only
Date received	

~~Three~~ 4 completed copies of this form and drawings should be sent to the District Council

DEVELOPMENT SERVICES
26 OCT 2007
RECEIVED

1. **Applicant** (in block capitals)

Name STEPHANIE DAVIES

Address 242 ASHBY ROAD
HINCKLEY LE10 1SW.

Tel. No. c/o 0116 247 0014

Agent (if any) to whom correspondence should be sent (in block capitals)

Name .....

Address .....

Tel. No. .....

2. Full address of location of the land or building on which the advertisement is to be displayed.

2 RUGBY ROAD, HINCKLEY LE10 0QS

DEVELOPMENT SERVICES
- 6 NOV 2007
RECEIVED

3 State the purpose for which the land or building is now used.

RETAIL (A1)

4 (a) Is the applicant the owner of the land of building?

NO

(b) If not, has the permission of the owner or of any other person entitled to give permission for the display of the advertisement been obtained? (see note 4). YES

5 State the nature of the advertisement (e.g. hoarding, shop sign, projecting sign, etc.).

SHOP SIGN

6 (a) Will the advertisement be illuminated?

YES.

(b) If so state the type of illumination (e.g. internally, externally, floodlighting, etc. and the intensity (in candella/sq.m or ft. lamberts).

~~EXTERNALLY MOUNTED LIGHT BOX~~ THE MAXIMUM LUMINANCE OF THE PROPOSED SIGN SHALL NOT EXCEED 1200 CANDELAS/MTR.

Will the illumination be static or intermittent?

STATIC

7. Period for which consent is sought (see note 2).

5 YEARS

8. Any additional information which the applicant may wish to supply.

THERE IS AN EXISTING SHOP SIGN. MANY OTHER SHOPS IN THE IMMEDIATE VICINITY HAVE SIGNS, MANY ILLUMINATED.

I/We hereby apply for consent to display the advertisement as described in this application and the accompanying drawings and in accordance therewith:

Date 23-10-07 Signed Stephanie Davies

On behalf of .....
(Insert applicant's name if signed by an agent)

CE.65[Σ] 10 Rev 7/97

1. I consider that the application falls within category ...13... of the prescribed fees table *(shown overleaf)*,

and, I am of the opinion that based on the following calculation the total fee payable is: £...75...

Payee: MRS S DAVIES	
£ 75	Date: 26/10/07 Receipt No: HNK 457482
£	Date: