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	

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

1. Applicant (in block capitals)

Name R.G. FLIDGE.

Address PEPPERCORN COTTAGE
8, MARKET PLACE, MARKET BOSWORTH

Tel. No. 01455 292102

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.

PEPPERCORN COTTAGE, 8, MARKET PLACE, MARKET BOSWORTH, NR NUNEATON WARKS CV13 0LE

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

SHOP AND BISTRO

DEVELOPMENT SERVICES
10 MAR 2008
RECEIVED

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

(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).

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

SHOP SIGNS

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).

EXTERNAL DOWN LIGHTERS HIDDEN UNDER EAVES AND REPLACE EXISTING BUCKET LIGHTS

Will the illumination be static or intermittent?

STATIC

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

5YRS

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

SEE ENCLOSED COPY OF E MAIL SENT TO PLANNERS. THIS IS NEEDED TO ENSURE THE CONTINUITY OF AN EXISTING BUSINESS IN MARKET BOSWORTH

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

Date 28.2.08

Signed R G Fludge

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