THREE COPIES REQUIRED

ADVERTISEMENT APPLICATION

For office use only
Application No. H02/0621/00
Date Registered 17 MAY 2000
Grid Reference

1. Please complete in block letters
NAME AND ADDRESS OF APPLICANT

NATIONWIDE BUILDING SOCIETY
NATIONWIDE HOUSE
PIPERS WAY
SWINDON

Tel. No.

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

ACKRETTS GROUP LTD
UNIT 4 MOUNDSMOOR COURT
RADFORD WAY
BILLERICAY
ESSEX CM12 0BZ

Tel. No. 01277 655128
(Personal contact name) ROSIE ACKRETTS

Please complete in block letters
FULL POSTAL ADDRESS OF THE APPLICATION SITE

SPAR 7 NORTH ST CROWLAND

OFFICE COPY

Please complete in block letters
BRIEF DESCRIPTION OF ADVERTISEMENT PROPOSED
(e.g. fascia sign, projecting box sign)

FASCIA CASH SIGN

Please complete
I attach the necessary plans and I enclose the fee of £ 50

Signed..... (Applicant/Agent) Date 15.5.2000
FOR NATIONWIDE BUILDING SOCIETY

Please complete **all** the sections below

2. SITE DETAILS

State the present use of the land or buildings: SPAR FOOD STORE

What is the applicant's interest in the site? (e.g. owner, tenant) TENANT

Has a planning application also been submitted for related proposals? State Yes or No: YES

If so, please describe the proposal or give planning reference. INSTALLATION OF ASTOMATIC TELLER MACHINE

3. ADVERTISEMENT DETAILS

Will the advertisement be illuminated? State Yes or No: YES.

If so, describe the type of illumination (e.g. internal): state whether static or intermittent: INTERNAL STATIC

State height of advertisement above ground level:
dimensions of advertisement:
size of letters or symbols:
colours of letters and background:
750 x 650 x 70 SIGN
1800 ABOVE GROUND.
150 LETTERS
RED & BLUE.

4. DURATION

Please state period consent is required for (max. 5 yrs). 5 YEARS