

ADVERTISEMENT APPLICATION

For office use only

Application No. **H05/0765/94**
 Date Registered
 Grid Reference **08 AUG 1994**

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

MR K GOOSCHILD
 FLEET MARINE STORES
 OLD MAIN ROAD
 FLEET MARINE
 SPADINE
 LINES
 Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

PODDINGTON
 63 DOBLE ST
 SPADINE
 LINES

Tel. No. **R.5002**
 (Personal contact name) **781056**

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

A17 FLEET MARINE

OFFICE
 COPY

Please complete in block letters

BRIEF DESCRIPTION OF ADVERTISEMENT PROPOSED

(e.g. fascia sign, projecting box sign)

ROADSIDE SIGN

Please complete

I attach the necessary plans and I enclose the fee of £ **NIL**

Signed **R. Gooschild** **PODDINGTON** (Applicant/Agent)

Date **3-8-94**

Please complete **all** the sections below

2. SITE DETAILS

State the present use of the land or buildings:

HIGHWAY JUNCTION

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

H05-0697-94

3. ADVERTISEMENT DETAILS

Will the advertisement be illuminated?

State Yes or No

NO

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

State height of advertisement above ground level:

dimensions of advertisement:

size of letters or symbols:

colours of letters and background:

960mm

900 x 540

100mm

BACK LETTERS ON WHITE BACKGROUND

4. DURATION

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

5 YEARS