

ADVERTISEMENT APPLICATION

For office use only

Application No. H16/0037/01

Date Registered

Grid Reference

11 JAN 2001

Please complete in block letters

NAME AND ADDRESS OF APPLICANT

ENTERPRISE INNS
FRIARS GATE
STRAFFORD ROAD
SOLIHULL, WEST MIDLANDS
B90 4BN

Tel. No.

NAME AND ADDRESS OF AGENT

(if form completed by agent)

ASHLEIGH IMAGE BUSINESS
ASHLEIGH HOUSE
MARSH STREET
ROMWELL, LEICESTER
Tel. No. 0113 2828292
(Personal contact name) MR. B CAMPBELL

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

LINCOLNSHIRE ROACHES
11 DOUBLE STREET, SPALDING Lincs PE11 2AA

Please complete in block letters

BRIEF DESCRIPTION OF ADVERTISEMENT PROPOSED

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

BREWERY SIGNAGE

Please complete

I attach the necessary plans and I enclose the fee of £ 50.00

Signed

(Applicant/Agent)

Date

5/01/01

Please complete **all** the sections below

2. SITE DETAILS

State the present use of the land or buildings:

Public House

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

OWNER

Has a planning application also been submitted for related proposals?

State Yes or No

NO

If so, please describe the proposal or give planning reference.

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:

EXTERNAL / STATIC

State height of advertisement above ground level:
dimensions of advertisement:
size of letters or symbols:
colours of letters and background:

PLEASE SEE ENCLOSED
DRAWINGS

4. DURATION

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

5 YEARS