THREE COPIES REQUIRED

ADVERTISEMENT APPLICATION

For office use only
Application No. H16/0987/96
Date Registered 30 OCT 1996
Grid Reference

Planning Received

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

POUNDSTRETCHER
PO Box YN21
KINGSMEADOW GATE
CROSS GREEN IND ESTATE
LEEDS - LS9 0LG
Tel. No. 0113 2406406.

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

SIGNS by MORRELL
Tarran Way South
Tarran Industrial Estate
Moreton, Wirral
Merseyside L46 4TD
Phone 0151 678 8989
Fax 0151 678 8816

Tel. No.
(Personal contact name)
MR PAUL CORKILL

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

UNIT 3, HOLLAND MARKET, SPALDING, PE11 1RQ

OFFICE COPY

Please complete in block letters

BRIEF DESCRIPTION OF ADVERTISEMENT PROPOSED
(e.g. fascia sign, projecting box sign)

INTERNALLY ILLUMINATED FASCIA SIGN.

Please complete

I attach the necessary plans and I enclose the fee of £ 45

Signed..... (~~Applicant~~/Agent) Date 22/10/96

*Please complete **all** the sections below*

2. **SITE DETAILS**

State the present use of the land or buildings:	NEW RETAIL UNIT
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	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:	INTERNALLY ILLUMINATED/STATIC
State height of advertisement above ground level: dimensions of advertisement: size of letters or symbols: colours of letters and background:	ABOVE 3.5 METRES 7 METRES x 1.5 METRES 0.5 METRES RED LETTERS ON A WHITE BACKGROUND

4. **DURATION**

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