THREE COPIES REQUIRED

ADVERTISEMENT APPLICATION

For office use only
Application No. H16/1031/00
Date Registered 22 AUG 2000
Grid Reference

1. Please complete in block letters

NAME AND ADDRESS OF APPLICANT

BRIGITTE DELAHOY
UPPER CUTS LTD
43 DOUBLE STREET,
SPALDING, LINCS.

Tel No. 01775 766816

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

OFFICE COPY

Tel. No. CRAIG DELAHOY
(Personal contact name)

Please complete in block letters

FULL POSTAL ADDRESS OF THE APPLICATION SITE

14 RED LION STREET, SPALDING, LINCS PE11 1SX.

Please complete in block letters

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

LIGHTING FOR SIGN ABOVE SALON.

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

Signed. BeDelahay..... (Applicant/Agent) Date. 21/8/00.....

Please complete the sections below

2. **SITE DETAILS**

State the present use of the land or buildings: EMPTY.

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

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): TWO OVERHANGING SPOTLIGHTS
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: N/A for Planing

4. **DURATION**

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