

Application for consent to display an advertisement(s).
Town and Country Planning (Control of Advertisement) Regulations 2007

Publication of applications on planning authority websites.

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website.
If you require any further clarification, please contact the Authority's planning department.

1. Applicant Name, Address and Contact Details

Title:	Mrs	First name:	Julianne	Surname:	Page
Company name	Best Practice South Limited				
Street address:	26-30 London Road			Country Code	
	Cowplain			National Number	
				Extension Number	
Town/City	Waterlooville			Telephone number:	
County:	Hampshire			Mobile number:	
Country:	England			Fax number:	
Postcode:	PO8 8DL			Email address:	
Are you an agent acting on behalf of the applicant? ☐ Yes ☒ No					

2. Agent Name, Address and Contact Details

No Agent details were submitted for this application

3. Site Address Details

Full postal address of the site (including full postcode where available)

House:	26	Suffix:	
House name:	Doctors Surgery		
Street address:	London Road		
	Cowplain		
Town/City:	Waterlooville		
County:			
Postcode:	PO8 8DL		
Description of location or a grid reference (must be completed if postcode is not known):			
Easting:	469192		
Northing:	110999		

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?

☒ Yes ☐ No

If Yes, please complete the following information about the advice you were given (this will help the authority to deal with this application more efficiently):

Officer name:

Title: First name: Surname:

Reference:

Date (DD/MM/YYYY): (Must be pre-application submission)

Details of the pre-application advice received:

My enquiry was two-fold, initially regarding highways signage and secondly for advice on erecting an 8' double sided totem sign. Kim from the helpdesk suggested I complete this form and submit for your urgent attention

5. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal?

☐ Yes ☒ No

6. Authority Employee/Member

With respect to the Authority, I am:

- (a) a member of staff
- (b) an elected member
- (c) related to a member of staff
- (d) related to an elected member

Do any of these statements apply to you?

☒ Yes ☐ No

If Yes, please provide details of the name, relationship and role:

I am the operational manager for the business

7. Type of Proposed Advertisement(s)

Please describe the proposed advertisement(s):

8' totem sign, double sided advertising new health facilities

How many of the following type of advertisements are you applying for?

Fascia sign(s) Projecting or hanging sign(s) Hoarding(s) Other

8. Location of Advertisement(s)

Is the advertisement(s) you are applying for already in place?

☐ Yes ☒ No

Is an existing advertisement(s) to be removed and replaced by the advertisement(s) in this proposal?

☐ Yes ☒ No ☐ Not Applicable

Will the proposed advertisement(s) project over a footpath or other public highway?

☐ Yes ☒ No

9. Advertisement(s) Period

Please state the period of time for which consent is sought for the advertisement

From: To:

10. Interest in the Land

Does the applicant own the land or buildings where the adverts are to be placed?

☒ Yes ☐ No

11 (a). Details of Proposed Advertisement(s) - Fascia Sign

What is the height from the ground to the base of the advertisement (in metres)?

m

What is the maximum projection of the advertisement from face of building (in metres)?

m

What are the dimensions of the proposed advertisement?

Height: x Width: x Depth: metres

What materials will the sign be made of?

What is the maximum height of any of the individual letters and symbols (in centimetres)?

cm

The colour of text and background:

Will the sign be illuminated?

☐ Yes ☒ No

12. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?

☒ Yes ☐ No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)

☐ The agent ☒ The applicant ☐ Other person

13. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.



Date