



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

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Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



The Market Hall Market Place Whitehaven Cumbria CA28 7JG Telephone 0300 373 3730 cumberland.gov.uk

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address				
Title:	First name:			
Last name:				
Company (optional):	SPEEDY HIRE			
Unit:	House House suffix:			
House name: ASHTON HOUSE				
Address 1: \ THE PARKS				
Address 2:				
Address 3:				
Town:	NEWTON-LE-WILLOWS			
County:				
Country:				
Postcode:	WR12 0JQ			

2. Agent Name and Address			
Title:	Me First name:		
Last name:	STANIOWSKI		
Company (optional):	MANNING ELLIOTT ARCHITECTS		
Unit:	House number: House suffix:		
House name:	LANG LANDS		
Address 1:	PALLET HILL		
Address 2:			
Address 3:			
Town:	PENRITH		
County:	CUMBRIA		
Country:			
Postcode:	CAII ØBY		

Version 2018.1

3. Site Address Details	4. Pre-application Advice				
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local				
Unit: House House suffix:	authority about this application? Yes No				
House name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this				
Address 1:	application more efficiently). Please tick if the full contact details are not				
Address 2:	known, and then complete as much as possible:				
Address 3: THE FLAX WORKS	Officer name: CHRIS HARRISON Reference:				
Town: CLEATOR					
County: CUMBRIA	Reference:				
Postcode (optional): CA23 3DU	Date (DD/MM/YYYY): (must be pre-application submission) 26(11 2024				
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission) Details of pre-application advice received?				
Easting: Northing:	ASPCICATION REQUIREMENT				
Description:	THE SECOND PROPERTY OF THE PRO				
5. Neighbour and Community Consultation	he proposal? Yes No				
Have you consulted your neighbours or the local community about the	he proposal? Yes V No				
If Yes, please provide details:					
6. Authority Employee / Member					
It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "related to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning, authority.					
	Yes No 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				
If Yes, please provide details of their name, role and how you are rela	If Yes, please provide details of their name, role and how you are related to them.				
· ·					

7. Type of Proposed Advertisement(s)	8. Location of Advertisement(s)			
Please describe the proposed advertisement(s):	Is the advertisement you are applying for			
REFER TO SUBMITTED	already in place? Yes 🔟 Yo			
	If Yes, please provide details of when the use or work started:			
SIGNAGE PROPOSAL.				
Please indicate the number of the following Number of				
Please indicate the number of the following Number of types of advertisement(s) you are applying for: advertisement(s)				
Application for fascia sign(s)	Is an existing advertisement(s) to be removed and replaced by the			
	advertisement(s) in this proposal?			
Application for a projecting or hanging sign(s)	Yes No Not applicable			
Application for a hoarding(s)	If Yes to either or both above, please show the existing sign(s) on			
Other	an elevation drawing or photograph and state the references for the drawing(s) or photographs.			
If you selected Other, please describe:				
REFER TO SUBMITTED				
REFER TO SUBMITTED SIGNAGE PROPOSAL				
	Will the proposed advertisement(s) project			
	over a footpath or other public highway? Yes No			
9. Advertisement Period	5 YEARS.			
Please state the period of time for which consent is sought for the advertisement: From 10/12/2024 To 10/12/2029 date (DD/MM/YYYY)				
10. Interest in the Land				
Does the applicant own the land or buildings where the adverts are to be placed?				
If No, has the permission of the owner or any other person entitled				
to give permission for the display of an advertisement been obtained? If No, why not? Yes No				
it NO, Wity Hot:				

11. Details of Proposed Advertisement(s)					
Please provide a full description of each pr	roposed advertisement (e.g. fascia	a sign, box sign, projecting sig	ın, hoarding, flag etc)		
	Advertisement 1	Advertisement 2	Advertisement 3		
Туре:	PLEASE REFER TO SIGNAGE PROPOSAL FOR FULL DETAILS				
a) The height from the ground to the base of the advertisement (in metres)					
b) The dimensions of the proposed advertisement(H x W x D) (in metric)					
c) The maximum height of any of the individual letters and symbols (in metric)					
d) The colour of the text and background					
e) Materials of the proposed sign(s)					
f) The maximum projection of advertisement from the face of the building					
Will any of the sign(s) be illuminated	Yes No	Yes No	Yes No		
If Yes for any of the proposed signs, answe	rg), h) and i)				
g) Details of method of illumination (internally illuminated/externally illuminated)					
h) illuminance levels (cd/m²)					
i) Will the illumination be static or intermittent?					

12. Planning Application Requirements - Chec	klist					
Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority (LPA) has been submitted.						
he original and 3 copies* of a ompleted and dated application form:		he drawing of the proposed advertisement should show its limensions and position on the land or building in question.				
Description of signs, size and The type of each sign for which application is being made, e.g. fascia, projecting box, pole-mounted free-standing, should be shown, together with the dimensions of each sign. If any of the signs are to be illuminated please describe the type of illumination, e.g. internal, external, floodlight, etc, and whether the illumination will be static, flashing, or have moving parts. The original and 3 copies* of each description should be provided:		or a sign, the drawing should indicate the materials to be used, fixings, colours, height above the ground and, where it would project from a building, the extent of the projection. A lite location plan should also be provided which identifies the proposed position of the advertisement and location of the site by reference to at least two named roads. It should be drawn to an identified scale and show the direction of lorth. Ordnance Survey maps are not required. Photographs and photomontages may be used. The original and 3 copies* of each drawing should be provided:				
The original and 3 copies* of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of north:	T ir	he original and 3 copies* of other plans and drawings information necessary to describe the subject of the ipplication:				
The correct fee:						
It is a condition of every consent granted by or under the Regulations that, before displaying any advertisement, the permission of the owner of the land or other person entitled to grant permission must be obtained. To display any advertisement without this permission is an offence, open to immediate prosecution. Where the site is within the boundaries of a highway, evidence that the application is acceptable to the highway authority must be provided. *National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.						
13. Declaration						
I/we hereby apply for planning permission/consent as described	ribed in th edge, any	Date DD/MM/YYYY): 70/12/2024 (date cannot be pre-application)				
14 Applicant Contact Dataile		(as a way Contact Dataile				
14. Applicant Contact Details		15. Agent Contact Details				
	ension mber:	Country code: National number: Country code: National number: Country code: Fax number (optional):				
16. 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 out a site visit, whom should they contact? (Please select only	carry y one)	Agent Applicant Other (if different from the agent/applicant's details)				
If Other has been selected, please provide:						
Contact name:		Telephone number:				
Email address:	 					