



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

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Jpon 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 securify 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 nformation 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 confact the Local Planning Authority directly.

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

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

I. Applicant	Name and Address	2. Agent Name and	Address
Title:	1 R First name: Josef	Title:	First name:
ast name: \(\)	ISHER	Last name:	
Company (optional):	CIMM FOOTBALL COACHING	Company (optional):	
Unit:	House num ber: House suffix:	I I I I I I I I I I I I I I I I I I I	House House suffix:
House name:	14NHILL COTTAIGE	House name:	
Address 1:		Address 1:	
Address 2:		Address 2:	
Address 3:		Address 3:	
ToWn: L	OCKERBIE	ToWn:	
County: Do	OMFRIES & GALLOWAY	County:	
Country:)K	Country:	
Postcode: D	911 125	Postcode:	

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 number: Ho use suf fix:	authority about this application?
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: OW PROSPECT WORKS	application more efficiently). Please tick if the full contact details are not
Address 2:	known, and then complete as much as possible:
Address 3: DISTINGTON	Officer name:
Town: WORKING TON	Reference:
County: COMBRIA	
Postcode (optional):	Date (DD/MM/YYYY): (must be pre-application submission)
Description of location or a grid reference. (must be completed if postcode is not known):	Details of pre-application advice received?
Easting: Northing:	
Description	
5. Neighbour and Community Consultation	
Have you consulted your neighbours or the local community about th	ne proposal? 🔲 Yes 🔀 No
If Yes, please provide details:	
6. Authority Employee/ Member It is an important principle of decision-making that the process is ope means related, by birth or otherwise, closely enough that a fair-minde conclude that there was bias on the part of the decision-maker in the	ed and informed observer, having considered the facts, would
Do any of the following statements apply to you and/or agent?	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	•

7. Type of Proposed Advertisement(s)	8. Location of Advertisement(s)					
Please describe the proposed advertisement(s):	Is the advertisement you are applying for					
SIGN TO LOCATED FOOTBALL	<u>د</u>	already in place?				
SIGH TO LOCATE FOOTBALL COACHING UNIT. ILLUMINATED CINTERNALLY) A		If Yes, please provide details of when the use or work started:				
MUMINATED (INTERNALLY) A	100 NTED					
ON ROAD PACING GABLE						
Please indicate the number of the following types of advertisement(s) you are applying for:	Number of advertisement(s)	le op ovietien od vertien	mont(s) to be removed			
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 ap	plicable	
Application for a hoarding(s)	If Yes to either or both	If Yes to either or both above, please show the existing sig an elevation drawing or photograph and state the referen				
Other		the drawing(s) or photo	ographs.			
If you selected Other, please describe:						
	-					
		Will the proposed adve		Yes	☐ No	
9. Advertisement Period						
Please state the period of time for which consent is sought for the advertisement:	om 01/05/20	70 01 05	zo3s date	(DD/MM/YY	YY)	
10. Interest in the Land						
Does the applicant own the land or buildings wh	to be placed?	Yes	5	⊠ No		
If No, has the permission of the owner or any othe to give permission for the display of an advertise	ed?	🔀 Yes		No		
If No, why not?						

11. Details of Proposed Advertisement(s)

Please provide a full description of each	proposed advertisement (e.g. fascia	sign, box sign, projecting sig	n, hoarding, flag etc)
	Advertisement 1	Advertisement 2	Advertisement 3
Туре:	FASCIA IUMINGED SICN		
a) The height from the ground to the base of the advertisement (in metres)	3.75m		
o) The dimensions of the proposed advertisement(H x W x D) (in metric)	2.65 × 3.50 × 0.200m		
c) The maximum height of any of the ndividual letters and symbols (in metric)	0.90M		
d) The colour of the text and background	BLACK BACKGROUND NHITE LETTER		
e) Materials of the proposed sign(s)			
) The maximum projection of advertisement from the face of the building	0.200m		
Will any of the sign(s) be illuminated	Yes No	Yes No	Yes No
f Yes for any of the proposed signs, answ	er g), h) and i)		
g) Details of method of illumination internally illuminated/externally Iluminated)	INTERNALLY ILLIMIN ATES		
n) illuminance levels (cd/m²)			
) Will the illumination be static or ntermittent?	574TI C.		

	ent all th	ne information in support of your proposal. Failure to submit all nvalid. It will not be considered valid until all information required by		
The original and 3 copies* of a completed and dated application form: 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:		The drawing of the proposed advertisement should show its dimensions and position on the land or building in question.		
		For 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 site 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 North. 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:	×	The original and 3 copies* of other plans and drawings information necessary to describe the subject of the application:		
The correct fee:	X			
owner of the land or other person entitled to grant permissi an offence, open to immediate prosecution.	on mus	ns that, before displaying any advertisement, the permission of the t be obtained. To display any advertisement without this permission is the application is acceptable to the highway authority must be		
*National legislation specifies that the applicant must provide	tronical ormat by	riginal plus three copies of the form and supporting documents (a lly or, the LPA indicate that a smaller number of copies is required. y post (for example, on a CD, DVD or USB memory stick). anning department to discuss these options.		
13. Declaration I/we hereby apply for planning permission/consent as descrinformation. I/we confirm that, to the best of my/our knowledgenuine opinions of the person(s) giving them. Or signed -	edge, an	this form and the accompanying plans/drawings and additional by facts stated are true and accurate and any opinions given are the Date DD/MM/YYYY): (date cannot be pre-application)		
14. Applicant Contact Details		15. Agent Contact Details		
	ension mber:	Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional):		
Email address (optional):		Email address (optional):		
16. Site Visit				
Can the site be seen from a public road, public footpath, bri		or other public land? Yes No		
If the planning authority needs to make an appointment to out a site visit, whom should they contact? (<i>Please select only</i>) If Other has been selected, please provide: Contact name:	carry y one)	Agent Applicant Other (if different from the agent/applicant's details)		
ML STEPHEN CALVIN				