Fife				
Fife House North Street Glenrothes KY7 5LT Tel: 03451 55 11 22 Email: devel	opment.central@fife	.gov.uk		
Applications cannot be validated until all the necessary documentation has been	submitted and the r	equired fee ha	s been paid.	
Thank you for completing this application form:				
ONLINE REFERENCE 100471244-001				
The online reference is the unique reference for your online form only. The Plar your form is validated. Please quote this reference if you need to contact the pla				
Description of Proposed Advertisement(s)				
Please describe the proposal: (You must select at least one) *				
Fascia sign Box sign Canopy Projecting sign				
Hoarding Flag Advance sign Other				
If Other, please provide further details: * (Max 500 characters)				
Item 1a - Internally illuminated logo Item 1b - Non-illuminated letters Item 2 - I illuminated wall and post mounted signage Item 9 - Non-illuminated banner fra				
How many advertisement signs are you seeking consent for? *	15			
Will the advertisement(s) be illuminated or non-illuminated? *	Both			
Please describe the type and colour of illumination to match the details on your lighting etc): * (Max 500 characters)	plans. (e.g. by exterr	nal white floodl	ights, internal blue	
Internally illuminated by white LEDs giving face illumination.				
Please describe the dimensions of the advert, materials used for its construction and the methods to be used for fixing it to the building: * (Max 500 characters)				
See visual G_78880				
Will any of the proposed advertisement(s) project over a footway or public road?	*	🗌 _{Yes} 🗙	No	
Is this a renewal of a previous consent: *		🗌 _{Yes} 🗵	No 🗌 Dont Know	

Site Address Details						
Planning Authority:	Fife Council					
Full postal address of the site (including postcode where available):						
Address 1:	10 LOW ROAD					
Address 2:	AUCHTERMUCHTY					
Address 3:						
Address 4:						
Address 5:						
Town/City/Settlement:	CUPAR					
Post Code:	KY14 7AU					
Please identify/describe the location of the site or sites						
L	711518	Easting	323634			
Applicant or Agent Details						
Are you an applicant or an agent? * (An agent is an architect, consultant or someone else acting on behalf of the applicant in connection with this application)						

Agent Details						
Please enter Agent details						
Company/Organisation:						
Ref. Number:		You must enter a Building Name or Number, or both: *				
First Name: *	Jessica	Building Name:	Astley Signs			
Last Name: *	Richardson	Building Number:				
Telephone Number: *	0333 230 0440	Address 1 (Street): *	Redforrest House			
Extension Number:		Address 2:	Queens Court North			
Mobile Number:		Town/City: *	Gateshead			
Fax Number:		Country: *	Tyne and Wear			
		Postcode: *	NE11 0BP			
Email Address: *	jessica.richardson@astley-uk.com					
Is the applicant an individ	lual or an organisation/corporate entity? *					
🗌 Individual 🛛 Orga	nisation/Corporate entity					
Applicant Det	ails					
Please enter Applicant de						
Title:		You must enter a B	uilding Name or Number, or both: *			
Other Title:		Building Name:				
First Name: *		Building Number:	1			
Last Name: *		Address 1 (Street): *	1 Angel Square			
Company/Organisation	Co-op Food Delivery Programme	Address 2:	1 Angel Square			
Telephone Number: *	03332300440	Town/City: *	Manchester			
Extension Number:		Country: *	United Kingdom			
Mobile Number:	03332300440	Postcode: *	M600AG			
Fax Number:						
Email Address: *	jessica.richardson@astley-uk.com					

1

Advertisement	(s) Period			
Please state the period of time for which consent is sought for the advertisement: *				
S Years More or les	ss than 5 years			
Pre-Application	n Discussion			
Have you discussed your pr	roposal with the planning authority? *	Yes X No		
Interest in the I	Land			
Does the applicant own the	land or buildings concerned? *	Yes X No		
Has the permission of the or Advertisement been obtained	wner or any other person entitled to give permission for the display of an ed? *	X Yes 🗌 No		
Planning Service Employee/Elected Member Interest				
Is the applicant, or the appli elected member of the plan	cant's spouse/partner, either a member of staff within the planning service or an ning authority? *	🗌 Yes 🛛 No		
Checklist – Ap	plication for Consent to Display an Advertis	sement		
Please complete the following checklist to make sure you have provided all the necessary information in support of your application. Failure to submit all this information may result in your application being deemed invalid. The planning authority will not start processing your application until it is valid.				
A Location plan which identi Identified scale and showing	ifies the land to which the application relates drawn to an g the direction of north. *	X Yes 🗌 No		
A copy of other plans and drawings or information necessary to describe the proposals. * (two must be selected)				
Site Plan or block plan	identifying where advert will be displayed.			
Detailed Elevations.				
Drawings of signs (inclu	uding details of illumination).			
Cross sections of signs	s showing relationship to building.			
Photomontage.				
Owners consent: Xes	s 🗌 No			
You must submit a fee with your application. Your application will not be able to be validated until the appropriate fee has been received by the planning authority.				
Declare – Adve	ertisement Consent			
I, the applicant/agent certify that this is an application for advertisement consent as described in this form, the accompanying plans, drawings and additional information.				
Declaration Name:	Miss Jessica Richardson			
Declaration Date:	14/09/2021			

Payment Details

Online payment: ZZPL00011080 Payment date: 14/09/2021 11:33:00

Created: 14/09/2021 11:34