

Civic Centre Windmillhill Street Motherwell ML1 1AB Tel: 01236 632500 Fax: 01698 302115 Email: esPlanning@northlan.gov.uk

Applications cannot be validated until all the necessary documentation has been submitted and the required fee has been paid.

Thank you for completing this application form:

ONLINE REFERENCE 100649379-002

The online reference is the unique reference for your online form only. The Planning Authority will allocate an Application Number when your form is validated. Please quote this reference if you need to contact the planning Authority about this application.							
Description of Proposed Advertisement(s)							
Please describe the proposal: (You must select at least one) *							
≤ Fascia sign ≤ Box sign	≤ Canopy	$\leq$	Projecting sign				
$\leq$ Hoarding $\leq$ Flag	≤ Advance sign	T	Other				
If Other, please provide further details	s: * (Max 500 characte	rs)					
Installation of a Medpoint prescription collection machine to the existing pharmacy window with vinyl wrap to the front							
How many advertisement signs are y	ou seeking consent for	r? *		1			
Will the advertisement(s) be illuminate	ed or non-illuminated?	*		illuminated			
Please describe the type and colour of illumination to match the details on your plans. (e.g. by external white floodlights, internal blue lighting etc): * (Max 500 characters)							
white static, 750 lumens, external LED strip light to top of screen							
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)							
2100mm high x 1700mm wide x les	ss than 100mm deep						
Will any of the proposed advertiseme	ent(s) project over a foo	otway	or public road?	*	≤ Ye	es T No	
Is this a renewal of a previous conser	nt: *				≤ Y6	es T No ≤	Dont Know

Site Address Details							
Planning Authority:	North Lanarkshire Council	North Lanarkshire Council					
Full postal address of the site (including postcode where available):							
Address 1:	273 MAIN STREET						
Address 2:							
Address 3:							
Address 4:							
Address 5:							
Town/City/Settlement:	BELLSHILL						
Post Code:	ML4 1AJ						
Please identify/describe the location of the site or sites							
Northing	660290	Easting	273467				
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) $\leq$ Applicant $T$ Agent							

Agent Details							
Please enter Agent details							
Company/Organisation:	MI Design						
Ref. Number:		You must enter a Building Name or Number, or both: *					
First Name: *	Clare	Building Name:					
Last Name: *	Burton	Building Number:	55				
Telephone Number: *		Address 1 (Street): *	Gravelly Bank				
Extension Number:		Address 2:	Lightwood				
Mobile Number:		Town/City: *	Stoke-on-Trent				
Fax Number:		Country: *	United Kingdom				
		Postcode: *	ST3 7EF				
Email Address: *							
Is the applicant an individual or an organisation/corporate entity? * $ \leq  \text{Individual}  T  \text{Organisation/Corporate entity} $							
Applicant Det	ails						
Please enter Applicant de	etails						
Title:	Mr	You must enter a Building Name or Number, or both: *					
Other Title:		Building Name:	First Point Pharmacy				
First Name: *	Ubayd	Building Number:	273				
Last Name: *	Ali	Address 1 (Street): *	Main Street				
Company/Organisation	Pharmastop	Address 2:	Bellshill				
Telephone Number: *		Town/City: *	Bellshill				
Extension Number:		Country: *	Scotland				
Mobile Number:		Postcode: *	ML4 1AJ				
Fax Number:							
Email Address: *							

### Advertisement(s) Period

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

T 5 Years  $\leq$  More or less than 5 years

# **Pre-Application Discussion**

Have you discussed your proposal with the planning authority? \*

≤ Yes T No

#### Interest in the Land

Does the applicant own the land or buildings concerned? \*

 $\leq$  Yes T No

Has the permission of the owner or any other person entitled to give permission for the display of an Advertisement been obtained?  $^{\star}$ 

 $T \text{ Yes} \leq \text{ No}$ 

### **Planning Service Employee/Elected Member Interest**

Is the applicant, or the applicant's spouse/partner, either a member of staff within the planning service or an elected member of the planning authority? \*

 $\leq$  Yes T No

# Checklist - Application for Consent to Display an Advertisement

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 identifies the land to which the application relates drawn to an Identified scale and showing the direction of north.  $^{\star}$ 

 $T \text{ Yes} \leq \text{ No}$ 

A copy of other plans and drawings or information necessary to describe the proposals. \* (two must be selected)

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m T} \,$  Site Plan or block plan identifying where advert will be displayed.

T Detailed Elevations.

 ${\bf T}$  Drawings of signs (including details of illumination).

Cross sections of signs showing relationship to building.

≤ Photomontage.

Owners consent:  $T \text{ Yes} \leq No$ 

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 – Advertisement 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 Clare Burton

Declaration Date: 24/10/2023

# **Payment Details**

Pay Direct

Created: 24/10/2023 12:27