

Business Centre G.2 Waverley Court 4 East Market Street Edinburgh EH8 8BG Tel: 0131 529 3550 Email: planning@edinburgh.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 100724447-002

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 Projecting sign
 Hoarding Flag Advance sign Other

How many advertisement signs are you seeking consent for? *

3

Will the advertisement(s) be illuminated 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)

internal illuminated via White LEDs, max illumination 400cdl/m2.

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)

2no hanging sign 1968mm w x 339mm h folded aluminium trays finished RAL 9017 satin black with 3mm opal acrylic lettering. signs suspended from canopy to match existing detailing. 1no fascia sign. individual built up letters, stainless steel returns and opal acrylic face, bonded to external glazing, internally illuminated with white LEDs. Max Letter depth between 100mm. star - 1595mm w x 1570mm h, "Superdrug" 4600mm w x 630mm h

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:

City of Edinburgh Council

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

Address 1:

Address 2:

Address 3:

Address 4:

Address 5:

Town/City/Settlement:

Post Code:

Please identify/describe the location of the site or sites

existing Superdrug retail unit and adjacent former Game unit

Northing

671526

Easting

330873

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)

Applicant Agent

Agent Details

Please enter Agent details

Company/Organisation:	<input type="text" value="Cube PSL"/>		
Ref. Number:	<input type="text"/>	You must enter a Building Name or Number, or both: *	
First Name: *	<input type="text" value="Donna"/>	Building Name:	<input type="text"/>
Last Name: *	<input type="text" value="Lang"/>	Building Number:	<input type="text" value="502"/>
Telephone Number: *	<input type="text" value="01925831710"/>	Address 1 (Street): *	<input type="text" value="Birchwood One Business Park,"/>
Extension Number:	<input type="text"/>	Address 2:	<input type="text" value="Dewhurst Road, Birchwood,"/>
Mobile Number:	<input type="text"/>	Town/City: *	<input type="text" value="Warrington"/>
Fax Number:	<input type="text"/>	Country: *	<input type="text" value="United Kingdom"/>
		Postcode: *	<input type="text" value="WA3 7GB"/>
Email Address: *	<input type="text" value="dlang@cubeps.co.uk"/>		

Is the applicant an individual or an organisation/corporate entity? *

Individual Organisation/Corporate entity

Applicant Details

Please enter Applicant details

Title:	<input type="text"/>	You must enter a Building Name or Number, or both: *	
Other Title:	<input type="text"/>	Building Name:	<input type="text"/>
First Name: *	<input type="text"/>	Building Number:	<input type="text" value="51"/>
Last Name: *	<input type="text"/>	Address 1 (Street): *	<input type="text" value="Sydenham Road"/>
Company/Organisation	<input type="text" value="Superdrug Stores PLC"/>	Address 2:	<input type="text"/>
Telephone Number: *	<input type="text"/>	Town/City: *	<input type="text" value="Croydon"/>
Extension Number:	<input type="text"/>	Country: *	<input type="text" value="United Kingdom"/>
Mobile Number:	<input type="text"/>	Postcode: *	<input type="text" value="CR0 2EU"/>
Fax Number:	<input type="text"/>		
Email Address: *	<input type="text"/>		

Advertisement(s) Period

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

5 Years More or less than 5 years

Pre-Application Discussion

Have you discussed your proposal with the planning authority? *

Yes No

Interest in the Land

Does the applicant own the land or buildings concerned? *

Yes No

Has the permission of the owner or any other person entitled to give permission for the display of an Advertisement been obtained? *

Yes 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? *

Yes 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. *

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 (including details of illumination).

Cross sections of signs showing relationship to building.

Photomontage.

Owners consent: Yes 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 Donna Lang

Declaration Date: 28/08/2025

Payment Details

Online payment: 7564578307326990204286;
Payment date: 29/08/2025 09:57:00

Created: 29/08/2025 09:57