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Application for Roundabout Sponsorship

1	Address of Roundabout you wish to sponsor:		
2	Number of signs required:		
3	Preferred location of sign (if appropriate)		
4	Name of Applicant:		
5	Business Address:		
6	Home/Correspondence Address (if different):		
7	Home Phone No:		
8	Work Phone No:		
9	Mobile Phone No:		
10	E-Mail Address: (Please note: Invoices may be issued electronically to the email address given)		
11	Preferred method of contact:	Email	
	(please √ box as appropriate)	Telephone	
		Letter	
12	Name of proposed sponsor if different from applicant:		
13	Address:		
14	Contact Phone No:		
15	E-mail Address: (Please note: Invoices may be issued electronically to the email address given)		

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16	Status of business	Limited Company or PLO		
	(please √ box as appropriate)	(Please answer questions 17 to	o 18)	
		Firm or Partnership		
		(Please answer questions 19 to	26)	
		Sole Trader		
Plea	se provide further details for a Limit	ted Company or PLC incor	porated under the Companies Act:	
17	Registered Number			
	3			
18	Registered Office			
Plea	se provide further details for a Firm	or Partnership:		
19	Name of Firm or Partnership			
	•			
20	Place of Business			
21	Name of Partner (#1)			
21	Name of Farther (#1)			
22	Home address of Partner #1			
23	Name of Partner (#2)			
24	Home address of Partner #2			
	riomo address or raimor #2			
25	Name of Partner (#3)			
26	Home address of Partner #3			
If the	ere are further partners please provi	ide names and addresses	on a separate sheet of paper	
	The second secon			
		T		
27	Nature of Activity to be			
	advertised			
28	Where did you hear of the			
	sponsorshipscheme?			
Nam	e (block capitals):			
_				
Posit	ion:			
Signa	Signature: Date:			

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Declarations:

- 1. I/we understand that in applying to sponsor a roundabout that I/we agree to the council either obtaining a financial reference in respect of the bank or building society account detailed above; and/or obtaining a credit reference agency search relating to the proposed sponsor(s) details given above.
- 2. I/we understand that any of the information obtained in connection with this application maybe shared with other service areas within West Lothian Council and that in signing this application form I/we give our consent for these purposes.
- 3. West Lothian Council is committed to the prevention and detection of crime. Any information you provide on this application form may be shared with the Police Service of Scotland for the purposes of the prevention or detection of crime, in accordance with the provisions of the Data Protection Act 1998, section 29.
- 4. I/we understand that completion of this form does not guarantee that I/we will be offered a sponsorship of the above property but that the council will have absolute discretion in this decision.
- 5. I/we agree that if the lease of this property is offered to me/us then I/we will be required to complete in full a direct debit mandate in respect of the monthly charge payable in respect of the property.
- 6. I/we hereby declare that the information given on this application form is correct in every respect. I/W e understand that if any of the foregoing information is subsequently discovered to be false then this may lead to termination of any lease agreement which has been entered into on the basis of the information supplied and may prejudice any subsequent dealings which I/W e have with the council in respect of any commercial or industrial property.
- 7. I/We declare that I/we :-
 - Are not subject to a Debt Arrangement Scheme; an undischarged bankruptcy/sequestration; any insolvency proceedings (such as bankruptcy, sequestration, liquidation, receivership or administration); any court orders relating to financial obligations; or an application for any of the foregoing.
 - Are not insolvent or apparently insolvent; in liquidation, receivership or administration.
 - Have not been wound up, dissolved or struck off; or signed any trust deed for or with creditors

Tel: 01506281836

E-mail: propertymanagement@westlothian.gov.uk

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Equality Monitoring Questionnaire - Roundabout sponsor

Property Management and Development is keen to ensure that it operates fairly, and without discrimination, in the letting of commercial property under its management. By completing and returning this form with your application you will help us to ensure that this is the case. The information you provide will be used solely for this purpose and not used to allocate property. [NB Where a lease is to be taken by a company, this form should be completed by the principal contact.] Thank you for your co-operation.

Name			
Property applied for			
		Please 🕬	boxes below as appropriate
GENDER Male	Female		
AGE Under	30 31 to 50 Over 50		
ETHNIC ORIGIN			
A. White			
Scottish Other	British Irish Other white backgr	round	
B. Mixed			
Any Mixed background:			
C. Asian, Asian Scottis	sh, or other Asian British		
Indian Pakis			
Other Asian background	1		
D. Black, Black Scottis	sh, or other Black British		
Caribbean Afri	can Other black background		
E. Other ethnic backgr	ound		
Any other ethnic backgr	ound:		
<u>DISABILITY</u>			
	erm illness, health problem or disability which limits your eent is that you are either short or long-sighted and this is nswer NO]		by wearing glasses or
YES	NO		
Do you have any sugge	stions about how we can improve our service?		

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Please complete the attached Equality Consent slip and return it with your questionnaire.

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Equality Monitoring Consent Form - Prospective tenant

Under the terms of the Data Protection Act 1998 the council is required to obtain your informed consent to the information provided by you on the Equality Monitoring form to be recorded, stored and processed for monitoring purposes.

Please confirm your consent to the information you have provided concerning your Ethnic Origin and Disability Status to be used for the purposes of monitoring Equal Opportunities.

Name (block capitals):	
Property applied for:	
Signature:	Date:

لفات الجسائية.	هذه المعلومات متوفرة بلغة بنزيل وعلى شريط وبخط كبيبر وبا الرجاء الإنصال بخدمة الترجمة على الهاتف 01506 280000
	প্রইণ, উপ, বড় অঞ্চলে এবং কমিউনিটির বিভিন্ন আঘণ্ডনিকের পাবেন। অনুগ্রহ করে। তে ট্রান্সলেশন মার্কিমের সালে ব্যোগায়ের কমেন। উলিঃ 01506280000
	以6字。錄音帶、大字部房及社區語言的大車提供。請舉紹傳達 ,電話:01506 280000
	s) ਨੇੜ੍ਹੀਨ ਦੇ ਪੜਣ ਵਾਲੀ ਸਿਖੀ, ਵੇਖ, ਜੱਡੇ ਪ੍ਰਿੰਟ ਅਤੇ ਸ਼ਹਾਸ ਦੀਆ ਹੋਰ ਭਾਸ਼ਾਵਾਂ ਵਿੱਚ ਉਜ਼ਸ਼ਸ਼ਾ। ਪ੍ਰਿੰਟੇਸ਼ਨ ਅਤੇ ਵਰਾਂਸ਼ਲੇਸ਼ਨ ਸਰਵਿਸ਼ ਨੂੰ ਇਸ ਨੈਂਬਰ ਤੇ ਸੰਯਰਵ ਰਹੇ । 01506 280000
-	ي معلمات ويل (الدعون شكة مجاللا)، تبيت يوسن الدائد كي عياض الدكون أن ولا باست الدائدة والدين الدين المستال الدين مريان الاروان الشدارة والمشير في مروان سد يجيف أبر 01506 280000 يداجة الانجاز والدين المراجة
Jub wydani	moga byc przełozone na jezyk Braille'a, dostępne na tasmie magnotofonowej e dużym dnakiem oraz przetłumaczone na jezyki mniejszosci narodowych o kontakt z Usługami Tkomaczoniowymi pod nomerem 01506 280000
community	n is available in braille, tape, large print an y languages. Contact the interpretation tion service on 01506 280000 .
hearing im phone nun	es offer the opportunity for people with a pairment to access the council. The text observed is 18001 01506 464427. A loop lso available in all offices.

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