**Tourism signing application form**

**Please complete the sections as indicated.**

**All applicants must complete sections 1- 5 and 12 - 14**

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| **1. Applicant Details** |

Company Name:

Contact Name:

Address 1:

Address 2:

Address 3:

Town:

Postcode:

Tel No:

E-mail:

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| **2 - Tourist Destination To Be Signed** | |
| **Destination Name**  (If applying for 'local services' signs please give name of community) |  |
| **Address 1** |  |
| **Address 2** |  |
| **Address 3** |  |
| **Town** |  |
| **Postcode** |  |
| **Destination Category** (See guidance notes. Tick box as appropriate)  Attraction  Urban Facility  Rural Facility  Camping/caravan  Leisure Drive  Local Services | |
| **If applying for a single facility, please state type (accommodation, pub, sports etc) in the box below.**  **If applying for 'local services' signs, please list all facilities considered eligible for inclusion on the signs in the box below.** | |
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| **Dates and times of opening** |  |
| **Current visitor numbers per annum** |  |
| **If available, please show the breakdown of the visitor numbers into the following categories:** | |
| 1. **UK holiday visitors** |  |
| 1. **Visits from home (day trips)** |  |
| 1. **Overseas visitors** |  |
| **Please indicate how visitor numbers are recorded. If they are not recorded, what is the basis of estimation?** |  |
| **Is there an entrance fee?** | **Yes** (answer next question)  **No** (skip to Section 3) |
| **If yes, please give current figure.** |  |

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| **3 - Parking** | |
| **Does the destination have parking?** | **Yes** (answer next question)  **No** (skip next question) |
| **If ‘Yes’ is it:**  **On site**  **Off site**  **Capacity** | |
| **Is the off site parking owned by you?** | **Yes** (skip next question)  **No** (answer next question) |
| **If ‘No’ is it:**  **Private**  **Public** | |
| **If the off site parking is not owned by you, have you obtained the permission of the owner for your visitors to be directed there?**  **Yes**  **No** | |
| **Approximately how far is the off site parking from the property?** |  |
| **Is the parking (on or off site) suitable for use by coaches?** | **Yes**  **No** |

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| **4 - Promotion And Marketing** | |
| **How do you promote your establishment to the tourist market?**  (Please tick box as appropriate and provide sample material, where possible)  **Local Guides**  **Local Newspapers**  **National Newspapers**    **National Journals**  **Local TV/Radio**  **Website(s)**  **Other** (please specify) | |
| **Are you a member of a tourist association or other professional or regulatory body?** | **Yes** (answer next question)  **No** (skip next question) |
| **If ‘Yes’, please specify** |  |
| **Are you registered with the Visitors Charter scheme run by the English Tourist Board?** | **Yes**  **No** |
| **Do you already have any existing brown/white tourism signs?** | **Yes**  **No** |
| **Do you have any private advertising signs in position?** | **Yes**   **No** |

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| **5 - General Facilities** | | | |
| **If not provided as an integral part of the main function of the business, please indicate which of the following additional facilities are also available and give details**. | | |
| **Facilities for the disabled** | **Yes**  **No** |  |
| **Toilets** | **Yes**  **No** |  |
| **Café/Restaurant** | **Yes**  **No** |  |
| **Accommodation** | **Yes**  **No** |  |
| **Educational or interpretative information** | **Yes**  **No** |  |
| **Retail outlet** | **Yes**  **No** |  |
| **Sporting facilities** | **Yes**  **No** |  |
| **Picnic areas or tables** | **Yes**  **No** |  |
| **Other** | **Yes**  **No** |  |

Applicants for urban and rural facilities to complete Sections 6-11 as appropriate.

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| **6 - Accommodation** | | |
| **Do you have an inspection certificate from VAQAS, AA or RAC?** | **Yes**   **No** |
| **Is the accommodation normally available to non pre‑booked tourists?** | **Yes**   **No** |

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| **7 - Public Houses** | | |
| **Do you serve meals, other than just bar snacks, at lunchtime?** | **Yes**   **No** |
| **Do you serve meals, other than just bar snacks, in the evenings?** | **Yes**   **No** |
| **Do you have a children's certificate?** | **Yes**   **No** |
| **Can you cater for children indoors?** | **Yes**   **No** |
| **Do you provide accommodation?** | **Yes**   **No** |
| **If yes, do you have an inspection certificate from ETB, AA or RAC?** | **Yes**   **No** |

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| **8 - Restaurants And Cafes** | | |
| **Can customers obtain a meal without pre-booking?** | **Yes**   **No** |
| **Are you registered under the Food Safety Act?** | **Yes**   **No** |

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| **9 - Retail Outlets** | | |
| **Do you depend predominantly on tourists for your revenue?** | **Yes**   **No** |
| **In addition to the main retail side of your business do you provide additional facilities of educational or special interest to visitors?** | **Yes** (answer next question)  **No** (skip next question) |
| **If yes, please specify** | **Yes**   **No** |

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| **10 - Touring Camping And Caravan Parks** | | |
| **Is your site licensed under the Caravan Sites and Control of Development Act 1960 and/or the Public Health Act 1936?** | **Yes**   **No** |
| **Do you have a minimum of 20 pitches available for casual overnight use?** | **Yes**   **No** |

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| **11 - Recreational, Entertainment And Sports Facilities** | | |
| **Are there any limitations on use based on membership or pre-booking?** | **Yes**   **No** |
| **Please specify what visitor facilities are available such as changing rooms, showers, refreshments etc.** |  |

# All applicants to complete sections 12 to 14

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| **12 - Planning Permission** | | |
| **Do you have the necessary planning permission to operate the tourist attraction/facility as described above?** | **Yes**   **No** |

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| **13 - Signs Detail And Location** | |
| **Please give your preferred choice of wording to appear on the signs.**  (For road safety reasons wording will be kept to a minimum.) |
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| **Please give the number of the symbol of your choice (restricted to one symbol\*). Please write 'none' if no symbol is required.**  \*Touring camping and caravan parks may have T6 and/or T7 symbol(s) as appropriate. |
|  |
| **Please indicate the location(s) where you would like your signing to commence and which direction you would like signing from.**  Where possible, please describe location by using road number; road/street name; junction name; Ordnance Survey grid reference etc. and/or by including a map.  Direction of travel can be indicated in the format 'from Dorchester direction' for example. If it is required from both directions please write 'from both directions'. |
|  |
| **... location details cont.** | |
| **14 - Declaration** | |

I wish to apply for consideration of tourism signing by Dorset Council and confirm that all the information given above is correct to the best of my knowledge.

I enclose a cheque for £290 (inc VAT) made payable to Dorset Council as a non‑refundable charge to cover the cost of the initial processing of this application.

I understand that even if my application initially qualifies, Dorset Council may refuse signs at the detailed design stage for road safety, traffic management or environmental reasons.

Name:

Signature:

Date:

Please return the completed application form to:

Dorset Highways (Tourism Signs), Sign Shop, Charminster Depot, Wanchard Lane, Charminster, Dorchester, DT2 9RP

If you wish to discuss any matters relating to this application please contact the the Sign Shop Team.

Applications for attractions located on the A35/A31 trunk road will be forwarded to the Department for Transport or its agent.

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| **For Dorset Council use only** | |
| Initial assessment charge received (stamp): | Application Reference Number: |
|  | Signing:  Strategic Network  Tourist Network  Trunk Road |
| Initial qualification  Rural  Urban  AONB etc  Include in comprehensive scheme  Local or bypassed scheme | Grounds for not qualifying:  Quality  Road Safety  Traffic Management  Environment |