

Application for prior notification of proposed development by  
 telecommunications code system operators.

Town and Country Planning General Permitted Development Order 1995 Schedule 2, part 24

**Publication of planning applications on council websites**

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council's planning department.

Please complete using block capitals and black ink.  
 It is important that you read the accompanying guidance notes as incorrect completion will delay the processing of your application.

1. Applicant Name and Address					
Title:	<input style="width: 90%;" type="text"/>	First name:	<input style="width: 95%;" type="text"/>		
Last name:	<input style="width: 98%;" type="text"/>				
Company (optional):	<input style="width: 98%;" type="text"/>				
Unit:	<input style="width: 40%;" type="text"/>	House number:	<input style="width: 40%;" type="text"/>	House suffix:	<input style="width: 20%;" type="text"/>
House name:	<input style="width: 98%;" type="text"/>				
Address 1:	<input style="width: 98%;" type="text"/>				
Address 2:	<input style="width: 98%;" type="text"/>				
Address 3:	<input style="width: 98%;" type="text"/>				
Town:	<input style="width: 98%;" type="text"/>				
County:	<input style="width: 98%;" type="text"/>				
Country:	<input style="width: 98%;" type="text"/>				
Postcode:	<input style="width: 80%;" type="text"/>				

2. Agent Name and Address					
Title:	<input style="width: 90%;" type="text"/>	First name:	<input style="width: 95%;" type="text"/>		
Last name:	<input style="width: 98%;" type="text"/>				
Company (optional):	<input style="width: 98%;" type="text"/>				
Unit:	<input style="width: 40%;" type="text"/>	House number:	<input style="width: 40%;" type="text"/>	House suffix:	<input style="width: 20%;" type="text"/>
House name:	<input style="width: 98%;" type="text"/>				
Address 1:	<input style="width: 98%;" type="text"/>				
Address 2:	<input style="width: 98%;" type="text"/>				
Address 3:	<input style="width: 98%;" type="text"/>				
Town:	<input style="width: 98%;" type="text"/>				
County:	<input style="width: 98%;" type="text"/>				
Country:	<input style="width: 98%;" type="text"/>				
Postcode:	<input style="width: 80%;" type="text"/>				

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit:  House number:  House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference.  
(must be completed if postcode is not known):

Easting:  Northing:

Description:

### 4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application?  Yes  No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date: (DD/MM/YYYY)  
(must be pre-application submission)

Details of pre-application advice received?

### 5. Telecommunications Apparatus

Please specify the type of apparatus to be installed or altered (e.g. call box, mast):

Please provide further details of the apparatus (e.g. height, size, colour, etc):

Are you replacing an existing installation?  Yes  No

If Yes, please provide further details of the existing apparatus (e.g. height, size, colour etc):

Are you submitting a declaration confirming that the apparatus is in full compliance with the requirements of the radio frequency (RF) public exposure guidelines of the International Commission on Non-Ionizing Radiation Protection (ICNIRP)? The emissions from all mobile phone network operators' equipment on the site must be taken into account when determining compliance.  Yes  No

### 6. Supplementary Information

Are you also providing a completed Supplementary Information Template (as set out in Annex F of the Code of Best Practice on Mobile Phone Network Development)?

Yes  No

### 7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal?  Yes  No

If Yes, please provide details:

## 8. Planning Application Requirements - Checklist

Please read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all information required will result in your application being deemed invalid. It will not be considered valid until all information required by the Local Planning Authority has been submitted.

3 copies of a completed and dated prior notification form:

The correct fee:

3 copies of the location plan to a scale not less than 1:2500:

## 9. Declaration

I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information.

Signed - Applicant:

Or signed - Agent:

Date (DD/MM/YYYY):

(date cannot be pre-application)

## 10. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

## 11. Agent Contact Details

Telephone numbers

Country code:

National number:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

## 12. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?  Yes  No

If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? *(Please select only one)*

Agent

Applicant

Other (if different from the agent/applicant's details)

If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: