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For office use

Date

Payee App. No. Fee

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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

Publication of applications on planning authority websites

Please note that the information provided on this application form and in supporting documents may be published on the Authority's website. If you require any further clarification, please contact the Authority'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.

Applicant Name and Address		2. Agent Name and Address	
Title:	First name:	Title:	MR First name: KEITH
Last name:		Last name:	JOHNSON
Company (optional):	BT OPENREACH	Company (optional):	MONO CONSULTANTS
Unit:	House number: House suffix:	Unit:	House number: House suffix:
House name:		House name:	VICTURIA BUILDENGS
Address 1:	C/O AGENT	Address 1:	1-7 PRINCESS STREET
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:		Town:	MANCHESTER
County:		County:	
Country:		Country:	
Postcode:		Postcode:	M2 4DF

3. Site Address Details	4. Pre-application Advice			
Please provide the full postal address of the application site.	Has assistance or prior advice been sought from the local			
Unit: House number: House suffix:	authority about this application? Yes No			
House name: LEINSTER MANSTONS	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: O/S 1-9 LEINSTER MANSIONS	application more efficiently). Please tick if the full contact details are not			
Address 2: FINCHLEY ROAD	known, and then complete as much as possible:			
Address 3: HAMPSTEAD	Officer name:			
Town: LONDON				
County:	Reference:			
Postcode (optional): NW3 6QB	Dete: (DD/MM//WW)			
Description of location or a grid reference.	Date: (DD/MM/YYYY) (must be pre-application submission)			
(must be completed if postcode is not known):				
Easting: Northing:	Details of pre-application advice received?			
Description:				
5. Telecommunications Apparatus				
Please specify the type of apparatus to be installed or altered (e.g. ca	all box mast).			
1 NO. BT DSLAM CABIN	JEI			
Discon provide further details of the enperatus (e.g. height size cold	uir otol:			
Please provide further details of the apparatus (e.g. height, size, colo				
DIMENSIONS - 1200x 450x	1000 MM (H)			
COLOUR - DARK GREEN				
Are you replacing an existing installation?	☐ Yes ☐ No			
If Yes, please provide further details of the existing apparatus (e.g. h	eight, size, colour etc):			
Are you submitting a declaration confirming that the apparatus is in	full compliance with			
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-lonizing Radiation Protection (ICN				
from all mobile phone network operators, equipment on the site must be taken into				
account when determining compliance.	Yes No			
(C. Cumplementent Information	A Naighbaire and Occurrent to Occupation			
6. Supplementary Information	7. Neighbour and Community Consultation			
Are you also providing a completed Supplementary Information	Have you consulted your neighbours or the local community about the proposal? Yes No			
Template (as set out in Annex F of the Code of Best Practice on Mobile Phone Network Development)?				
,	If Yes, please provide details:			
☐ Yes ☑ No				
-				

8. Planning Application Requirements - Checklist					
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed invited the Local Planning Authority has been submitted.					
The original and 3 copies of a completed and dated prior notification	form: The correct fee:				
The original and 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 the information.	nis form and the accompanying plans/drawings and additional				
Signed - Applicant: Or signed - Agent:					
	Stare				
	Stane				
Date (DD/MM/YYYY):					
©2/12/2010 (date cannot be pre-application)					
10. Applicant Contact Details	11. Agent Contact Details				
Telephone numbers Extension	Telephone numbers Extension				
Country code: National number: number:	Country code: National number: Extension number:				
	0161 24 1720				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Country code: Fax number (optional):	Country code: Fax number (optional):				
	0161 839 8840				
Email address (optional):	Email address (optional):				
Email address (optional).	Ernan 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:					