

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 darffication, please contact the Authority's planning department.

Heaze 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. Applic	ant Name and Address	2. Agent Name and Address			
Title:	First name:	Title: Mr. First name: PAUL			
Last name:		Last name: ○1 N∈1∠∠			
Company (optional):	MHXIMUS NETWORKS CTD	Company (optional): METROPOLLS PZRNNING LOESIGN			
Unit:	House House suffix:	Unit: House House suffix:			
House name:		House name:			
Address 1:	LIO AGENT	Address 1: 4 UNDERWOOD ROW			
Address 2:		Address 2:			
Address 3:		Address 3:			
Town:		Town: LONDON			
County:		County:			
Country:		Country: U. K			
Postcode:		Postcode: NI 74Q			

	ddress Details		Pre-application Advice     Has assistance or prior advice been sought from the local
Rease provi	de the full postal address of the app		authority about this application?
Unit:	House number:	House suffix:	, 163
House name:	PUBL ( C . HIGHWA	Y	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this
Address 1:	6 GRAYS INN RO	AD	application more efficiently).  Rease tick if the full contact details are not known, and then complete as much as possible:
Address 2:			Officer name:
Address 3: Town:			Onto have.
County:	CONDON		Reference:
	CONDON		
(optional): Description	of location or a grid reference.		Date: (DD/MM/YYYY) (must be pre-application submission)
	Northing:		Details of pre-application advice received?
Description		(1000)	
5. Teleco	mmunications Apparatus		
Rease spec	cify the type of apparatus to be inst	alled or altered (e.g. call	box, mast):
CHE	LL BOX		
Ress nro	vide further details of the apparatus	(e.a. height, size colou	r. eic):
DI 4 W.S.f	REFER TO ATTHO	HED SOPPL	EWENTHEN DOCUMENTATION
MA	AXIMUL NETWORKS	HOL - TELEPHONE	: kiosk
Are you rep	lacing an existing installation?		Yes P10
If Yes, pleas	se provide further details of the exis	ting apparatus (e.g. hei	ght, size, colour etc):
			U
the require	bmitting a declaration confirming t ements of the radio frequency (RF) p	ublic exposure guidelin	nes of the
Internation	al Commission on Non-Ionizing Ra	diation Protection (ICN)	RP)? The emissions
account wh	obile phone network operators' equ hen determining compliance.	ipment on the sternus	Yes 170
			7. Neighbour and Community Consultation
	ementary Information	1	7. Neighbour and Community Consultation Have you consulted your neighbours or
Template (a	o providing a completed Suppleme as set out in Appendix Eof the Code one Network Development)?	ntary Information of Best Practice on	the local community about the proposal? Yes
MODIFE P10	inc recision perendiment):	Tyes TYNO	If Yes, please provide details:
		_ 168 [AIMO ]	
			SDate: 2015:05:18:85 \$Perigon: 6174.5

Reass read the following checklist to make sure you h information required will result in your application bei the Local Ranning Authority (LPA) has been submitted	ing deemed inv	information in su alid. It will not be	pport of your proposal. Failure to sub considered valid until all information	mit all required by
The original and 3 copies' of a completed and dated p	rior notification	form:	The correct fee:	$\square$
The original and 3 copies of the location plan to a scale	e not less than 1	12500:		
National legislation specifies that the applicant must joid of four copies), unless the application is submitte LPAs may also accept supporting documents in electric you can check your LPA's website for information or co	d electronically onic format by	or, the LPA indica post (for example,	te that a smaller number of copies is on a CD, DVD or USB memory stick).	
Declaration //we hereby apply for planning permission/consent as nformation. I/we confirm that, to the best of my/our k jenuine opinions of the person(s) quiving them.	described in th nowledge, any	isform and the ac facts stated are tr	companying plans/drawings and add ue and accurate and any opinions giv	ditional en are the
Signed - Applicant:				
Date (DD/MM/YYYY):		L		
0 - 1 0				
2 · · · · 2 · Zo I / (date cannot be pre-ap	pplication)			
10. Applicant Contact Details		11. Agent O	ontact Details	
Telephone numbers	1	Telephone numbers		
Country code: National number:	Extension number:	Country code:	National number:	Extension number:
Teationa number.	1	0044	(0) 2073242662	7
Country code: Mobile number (optional):	'	Country code:	Mobile number (optional):	
	1 1			1
Country code: Fax number (optional):		Country code:	Fax number (optional):	1
Country code: Fax number (optional):  Email address (optional):		Country code: Email address (		
Email address (optional):				
Email address (optional):		Email address (	optional):	]
Email address (optional):  12. Site Visit Can the site be seen from a public road, public footpat		Email address (	? ✓ Yes No	]
Email address (optional):	ent to carry	Email address (	? ✓ Yes No	erent from the
Email address (optional):  12. Site Visit 2an the site be seen from a public road, public footptst (the planning authority peerls to make an appointment	ent to carry	Email address (	? Yes No Applicant Other (if diffigure applicant agent/applic	