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Development Management
Camden Town Hall Extension
Argyle Street
London WC1H 8EQ

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

Town and Country Planning General Permitted Development Order 2015 Schedule 2, Part 16

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.

1. Applicant Name and Address		2. Agent Name and Address	
Title:	<input type="text"/>	Title:	MR <input type="text"/>
First name:	<input type="text"/>	First name:	PAUL <input type="text"/>
Last name:	<input type="text"/>	Last name:	O'NEILL <input type="text"/>
Company (optional):	MAXIMUS NETWORKS LTD <input type="text"/>	Company (optional):	METROPOLIS PLANNING DESIGN <input type="text"/>
Unit:	<input type="text"/>	Unit:	<input type="text"/>
House number:	<input type="text"/>	House number:	<input type="text"/>
House suffix:	<input type="text"/>	House suffix:	<input type="text"/>
House name:	<input type="text"/>	House name:	<input type="text"/>
Address 1:	110 REGENT <input type="text"/>	Address 1:	4 UNDERWOOD ROW <input type="text"/>
Address 2:	<input type="text"/>	Address 2:	<input type="text"/>
Address 3:	<input type="text"/>	Address 3:	<input type="text"/>
Town:	<input type="text"/>	Town:	LONDON <input type="text"/>
County:	<input type="text"/>	County:	<input type="text"/>
Country:	<input type="text"/>	Country:	UK <input type="text"/>
Postcode:	<input type="text"/>	Postcode:	N2 7LQ <input type="text"/>

3. Site Address Details Please provide the full postal address of the application site. Unit: <input type="checkbox"/> House number: <input type="checkbox"/> House suffix: <input type="checkbox"/> House name: PUBLIC HIGHWAY Address 1: 99 131 FINCHLEY ROAD Address 2: Address 3: Town: LONDON County: LONDON Postcode (optional): NW3 6HY Description of location or a grid reference (must be completed if postcode is not known): Easting: 52 6631 Northing: 184 309 Description:	4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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: <input type="checkbox"/> 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): CALL BOX Please provide further details of the apparatus (e.g. height, size, colour, etc): PLEASE REFER TO ATTACHED SUPPLEMENTARY DOCUMENTATION MAXIMUS NETWORKS LTD - TELEPHONE KIOSK Are you replacing an existing installation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
6. Supplementary Information Are you also providing a completed Supplementary Information Template (as set out in Appendix E of the Code of Best Practice on Mobile Phone Network Development)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Neighbour and Community Consultation Have you consulted your neighbours or the local community about the proposal? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 (LPA) has been submitted. The original and 3 copies* of a completed and dated prior notification form: <input checked="" type="checkbox"/> The correct fee: <input checked="" type="checkbox"/> The original and 3 copies of the location plan to a scale not less than 1:2500: <input checked="" type="checkbox"/> <small>*National legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a total of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. LPAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). You can check your LPA's website for information or contact their planning department to discuss these options.</small>	
9. Declaration I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. Signed - Applicant: _____ Or signed - Agent: _____ Date (DD/MM/YYYY): <u>20.02.2017</u> (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: <u>0044</u> Extension number: _____ Country code: _____ Mobile number (optional): <u>(0)207 324 2662</u> 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Applicant <input type="checkbox"/> Other (if different from the agent/applicant's details) If Other has been selected, please provide: Contact name: _____ Telephone number: _____ Email address: _____	