

Application for prior notification of proposed development by telecommunications codesystem operators.

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

Privacy Notice

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Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:



Email: planning@camden.gov.uk

Phone: 020 7974 4444 Fax: 020 7974 1680 Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address						
Title:	First name:					
Last name:	MAXIMUS NETWORKS LTD					
Company (optional):						
Unit:	House number: House suffix:					
House name:						
Address1:	C/O AGENT					
Address 2:						
Address3:						
Town:						
County:						
Country:						
Postcode:						

2. Agent Name and Address							
Title:	MR	First name:	PAUL				
Last name:	O'NEILL						
Company (optional):	METROPOLIS PLANNING AND DESIGN						
Unit:		House number:		House suffix:			
House name:							
Address 1:	4 UNDI	ERWOOD R	OW				
Address 2:							
Address 3:							
Town:	LONDO	N					
County:							
Country:	UNITEI	O KINGDON	Л				
Postcode:	N1 7LQ		rsion 2018				

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 House suffix:	authority about this application? Yes V No			
House PUBLIC HIGHWAY name:	If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this			
Address 1: FINCHLEY ROAD OPPOSITE CINEMA	application more efficiently). Please tick if the full contact details are not			
Address 2:	known, and then complete as much as possible:			
Address 3:	Officer name:			
Town: LONDON	Reference:			
County: LONDON	Telefielde:			
Postcode (optional): NW3 6HX	Date: (DD/MM/YYYY)			
Description of location or a grid reference. (must be completed if postcode is not known):	(must be pre-application submission)			
Easting: 526640 Northing: 184223	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 hove marth.			
A PUBLIC CALL BOX	iii DOX, Illast).			
A TOBLIC CALL BOX				
Please provide further details of the apparatus (e.g. height, size, colo	ur.etc):			
PLEASE REFER TO ATTACHED SUPPLEMENTARY				
LTD PUBLIC CALL BOX DESIGN' AND ANNOTATE				
Are you replacing an existing installation?	☐ Yes ✓ No			
If Yes, please provide further details of the existing apparatus (e.g. he	eight, size, colour etc):			
Are you submitting a declaration confirming that the apparatus is in the requirements of the radio frequency (RF) public exposure guideli International Commission on Non-Ionizing Radiation Protection (ICN from all mobile phone network operators' equipment on the site mu	ines of the IRP)? The emissions			
account when determining compliance.	Yes No			
	(-)			
6. Supplementary Information	7. Neighbour and Community Consultation			
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)?	Have you consulted your neighbours or the local community about the proposal? Yes No			
	If Yes, please provide details:			
Yes ✓ No				

Version 2018

8. Planning Application Requirements - Checklis	t		
Please read the following checklist to make sure you have sen information required will result in your application being deer the Local Planning Authority (LPA) has been submitted.			
The original and 3 copies* of a completed and dated prior not	ification form: 🗹	The correct fee:	\checkmark
The original and 3 copies of the location plan to a scale not les	ss than 1:2500: 🗹		
*National legislation specifies that the applicant must provide total of four copies), unless the application is submitted electr LPAs may also accept supporting documents in electronic for You can check your LPA's website for information or contact t	onically or, the LPA in mat by post (for exam	dicate that a smaller number of copie ple, on a CD, DVD or USB memory stic	s is required.
9. Declaration			
I/we hereby apply for planning permission/consent as describinformation. I/we confirm that, to the best of my/our knowled genuine opinions of the person(s) giving them.	ed in this form and th ge, any facts stated ar	e accompanying plans/drawings and e true and accurate and any opinions	additional given are the
Signed - Applicant:	Or signed - A	gent:	
		JanleVell	
Date (DD/MM/YYYY):			
06/11/2018 (date cannot be pre-application	on)		
10. Applicant Contact Details	11. Agen	t Contact Details	
Telephone numbers	Telephone r	numbers	
Exter	nsion		Extension
Country code: National number: number	oer: Country coo	de: National number:	number:
	0044	(0)2073242662	
Country code: Mobile number (optional):	Country cod	de: Mobile number (optional):	
Country code: Fax number (optional):	Country coo	de: Fax number (optional):	
Email address (optional):	Email addre	ess (optional):	
12. Site Visit			
Can the site be seen from a public road, public footpath, bridle	eway or other public l	and? ✓ Yes No	
If the planning authority needs to make an appointment to ca out a site visit, whom should they contact? (Please select only c	rry <i>ne)</i> 🗸 Agen		different from the plicant's details)
		-9-110-46	,
lf Other has been selected, please provide:			
If Other has been selected, please provide: Contact name:	Telephone n	umber:	7

Email address: