Printed on: 01/04/2020 09:10:04

Application No:Consultees Name:Received:Comment:2020/0989/PLesley Stevas31/03/2020 18:12:37 OBJ

Response:

I strongly object to this application. Camden Council have a duty of care to protect the health and safety of residents. 80% 0f scientific evidence confirms that there are harmful effects on humans of electromagnetic radiation from 2G – 5G. 5G is now being rolled out and at least two of these antennas are MIMO which transmits 5G. Many of Camden residents such as myself suffer from electro-magnetic radiation sensitivity which is recognized by W.H.O. as a disability. The effects of this sort of radiation is extremely detrimental to my health. I do not give permission for these masts to be installed and consider it a breach of the Nuremberg Code if they are installed. ICNIRP 2002 in its General Statement accepted that some people need non-thermal guidelines and not its thermal ones.

https://www.icnirp.org/cms/upload/publications/ICNIRPphilosophy.pdf

p.546: Different groups in a population may have differences in their ability to tolerate a particular NIR exposure. For example, children, the elderly, and some chronically ill people might have a lower tolerance for one or more forms of NIR exposure than the rest of the population. Under such circumstances, it may be useful or necessary to develop separate guidelines for the general population to include such people. The health document produced by Cornerstone is incorrect and Cornerstone must be aware that their equipment is detrimental the health of residents. Georgia Gould and Andrew Maughan of Camden Council have been sent documents by a lawyer asking them to safeguard the health and safety of residents and to stop the roll out of 5G. This application of 12 antennae must be stopped.

The current ICNIRP EMF radiation guidelines are not fit for purpose in that they only address EMF heating effects, and not many other physiological effects. There is already a huge body of work by specialist scientists and doctors citing adverse effects on health of prolonged exposure to high frequency EMF radiation at levels well below the ICNIRP-recommended guideline maxima. This situation should not be exacerbated by the introduction of widespread mm Wave EMF radiation into the public realm until it is proven that subjecting the public to potentially ubiquitous and enduring mm Wave EMF radiation will not result in any adverse health consequences.

Moreover, many of those on the ICNIRP board have an unacceptable conflict of interest in that they are closely associated with, and/or funded by, the mobile telecommunications industry, and as such have an interest in declaring safe long-term EMF radiation at high frequencies. In addition, many of those on the ICNIRP board are not from a medical and medical science background and are therefore arguably not best suited to considering serious matters affecting public health in the face of long-term exposure to mm Wave radiation. Similar arguments can be made of those involved in the UN/WHO "EMF Project" that to an extent has set the parameters for the work of ICNIRP and with which there is an excessively large overlap in membership. It is understood that a number of ICNIRP members are also playing a leading role in the production of the WHO monograph on Radio Frequency Fields Environmental Health Criteria. Cornerstone's and PHE's advice to the UK government and planners is unscientific and not protective since they have not developed 'separate guideline levels' or 'adjusted' ICNIRP's short-term guidelines for the part of the population which has lower tolerance levels than those suited to ICNIRP's short-term ones. Cornerstone's and PHE's advice to the UK government and planners is therefore defective, since they have failed to include this aspect of ICNIRP's advice, and this failure seems culpable and an area which should be challenged. Some 80% of relevant studies show adverse effects below ICNIRP's heating levels, indicating the extent to which Cornerstone, ICNIRP, PHE and WHO are adopting a fringe or minority viewpoint. I have written to Camden Council explaining my medical diagnosis of electrical-hypersensitivity and Camden Council have a duty of care to not install such devices which will harm me and others in a similar situation. 5G will harm me and others. In Sweden electro-magnetic hypersensitivity is a recognized disability and the government accepts responsibility to help those individuals to screen their homes from E.M.Fs. Better still to

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				not install them at all. Please watch this recording of a Panorama Documentary dated 2011 about how WiFi and mobile masts effect sufferers of electrical hypersensitivity https://www.youtube.com/watch? v=yQGo0hesqlg#action=share Frank de Vocht, a member of the government's pro-wireless 'front' committee Committee on Medical Aspects of Radiation in the Environment has recently admitted that a small percentage of the population is sensitive to RFR below ICNIRP's heating short-term guidelines. Bristol 24/7: https://www.bristol247.com/news-and-features/news/concerns-over-bristols-5g-roll-out/ Cornerstone and PHE should, like ICNIRP in 2002, be advising the UK government and planners that such people with lower tolerance levels exist and need protection according to the majority-viewpoint scientific evidence, be developing relevant long-term and non-thermal guidelines, or adopting appropriate long-term and non-thermal guidelines such as IGNIR. https://ignir.org Please see the critique of ICNIRP guidelines, especially as regards radar-like beams, 5G etc — on the ES-UK website under Resources section 3: http://www.es-uk.info/wp-content/uploads/2020/02/03.11-ICNIRP-Guidelines-Unscientific-and-Not-Protective.pdf This application of mobile masts to include 5G sets a dangerous precedent and I urge the council to refuse this application. This is because it will injure residents and cause pain and suffering to residents who have electrical hypersensitivity, like myself, who will suffer greatly from more electromagnetic radiation transmitted by the antennae proposed. Camden has a duty of care to protect people with disabilities under the Health and Social Care Act and the HSCA must prevail.
2020/0989/P	John Dempster	31/03/2020 16:13:20	ОВЈ	The proposed 12 aerial poles and associated works would seriously disfigure the appearance of Hill View. Although a fairly modern building its appearance fits well with the houses in the adjacent conservation area. The building is fairly unobtrusive when viewed from Primrose Hill but the aerials would catch the eye and detract from what must be one of the finest views in London. The visual damage would greatly outweigh any benefits from improved telephonic coverage.
2020/0989/P	John Dempster	31/03/2020 16:13:18	OBJ	The proposed 12 aerial poles and associated works would seriously disfigure the appearance of Hill View. Although a fairly modern building its appearance fits well with the houses in the adjacent conservation area. The building is fairly unobtrusive when viewed from Primrose Hill but the aerials would catch the eye and detract from what must be one of the finest views in London. The visual damage would greatly outweigh any benefits from improved telephonic coverage.
2020/0989/P	John Dempster	31/03/2020 16:13:21	OBJ	The proposed 12 aerial poles and associated works would seriously disfigure the appearance of Hill View. Although a fairly modern building its appearance fits well with the houses in the adjacent conservation area. The building is fairly unobtrusive when viewed from Primrose Hill but the aerials would catch the eye and detract from what must be one of the finest views in London. The visual damage would greatly outweigh any benefits from improved telephonic coverage.

Total: 2