

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.co.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

Title:		First name:	
Last name:			
Company (optional):	CORNERSTONE TELECOMMUNICATIONS INFRASTRUCTURE LIMITED (CIL) AND VODAFONE LIMITED		
Unit:		House number:	
		House suffix:	
House name:	CIL	VODAFONE LIMITED	
Address 1:	BUILDING 1330 THE EXCHANGE	VODAFONE HOUSE	
Address 2:	ARLETON BUSINESS PARK	THE CONNECTION	
Address 3:			
Town:	THEALE	NEWBURY	
County:	BERKSHIRE	BERKSHIRE	
Country:	ENGLAND		
Postcode:	RG74 5A RG14 2FN		

207973

2. Agent Name and Address

Title:	MR	First name:	JAMAAL
Last name:	HAFIZ		
Company (optional):	CLARKE TELECOM LIMITED		
Unit:		House number:	
		House suffix:	
House name:	UNIT E		
Address 1:	MADISON PLACE		
Address 2:	NORTHAMPTON ROAD		
Address 3:			
Town:	MANCHESTER		
County:	GREATER MANCHESTER		
Country:	ENGLAND		
Postcode:	M40 5AG		

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name: **LAND IN TITTESWORTH RESERVE**

Address 1: **BUXTON ROAD**

Address 2:

Address 3:

Town: **LEIC**

County: **STAFFORDSHIRE**

Postcode (optional): **ST13 8TG**

Description of location or a grid reference.
(must be completed if postcode is not known):

Easting: **394860** Northing: **357762**

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? ☒ Yes ☐ 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: ☐

Officer name:

CHRISTOPHER JOHNSTON

Reference:

Date: (DD/MM/YYYY)
(must be pre-application submission)

26.01.18

Details of pre-application advice received?

PLEASE SEE ATTACHED SUPP INFO

5. Telecommunications Apparatus

Please specify the type of apparatus to be installed or altered (e.g. call box, mast):

THE INSTALLATION OF A NEW 22.5M MAST, SUPPORTING 3NO. ANTENNAE AND 1NO. 0.6M TRANSMISSION LINE DSH. IN ADDITION THE INSTALLATION OF 3NO. EQUIPMENT CABINETS AND 1NO. ELECTRICAL METER CABINET WITHIN A 1.8M PALISADE FENCED COMPOUND, PLUS ANCILLARY TELECOMMUNICATIONS DEVELOPMENT THERE TO.

Please provide further details of the apparatus (e.g. height, size, colour, etc):

22.5m mast - RAL6009 - GRN GREEN
EQUIPMENT CABINETS:
(x1) - **BTS3900A2 - 720 x 750 x 1925mm - RAL6009 - GRN GREEN** - **SIGNAL METER - 655 x 260 x 1015mm**
(x1) - **VF COMBIBLER - 750 x 350 x 1130mm - RAL6009 - GRN GREEN**
(x1) - **TSC - 620 x 680 x 715mm**

Are you replacing an existing installation? ☐ Yes ☒ 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. ☒ Yes ☐ 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)?

☒ Yes ☐ No

7. Neighbour and Community Consultation

Have you consulted your neighbours or the local community about the proposal? ☐ Yes ☐ 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:

☒

The correct fee:

☒

The original and 3 copies of the location plan to a scale not less than 1:2500:

☒

*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.

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):

04/04/2018

(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:

Extension number:

Country code:

Mobile number (optional):

Country code:

Fax number (optional):

Email address (optional):

JAMMAL HAFIZ @ CLARKE - TELECOM.COM

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: