

13PT 0636

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

Town and Country Planning General Permitted Development Order 1995 Schedule 2, part 24

You can complete and submit this form electronically via the Planning Portal by visiting [www.planningportal.gov.uk/apply](http://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:	<div>—</div>	Title:	<div>MRS</div>
First name:	<div>—</div>	First name:	<div>JENNIE</div>
Last name:	<div>—</div>	Last name:	<div>HANN</div>
Company (optional):	<div>CONSILIOUS TELECOMMUNICATIONS INFRASTRUCTURE LIMITED</div>	Company (optional):	<div>LAMBERT SMITH HAMPTON</div>
Unit:	<div>—</div>	Unit:	<div>—</div>
House number:	<div>—</div>	House number:	<div>—</div>
House suffix:	<div>—</div>	House suffix:	<div>—</div>
House name:	<div>VODAFONE HOUSE</div>	House name:	<div>—</div>
Address 1:	<div>THE CONNECTION</div>	Address 1:	<div>6<sup>TH</sup> FLOOR</div>
Address 2:	<div>—</div>	Address 2:	<div>3 HARDMAN STREET</div>
Address 3:	<div>—</div>	Address 3:	<div>SPRINGFIELD</div>
Town:	<div>NEWBURY</div>	Town:	<div>MANCHESTER</div>
County:	<div>Berkshire</div>	County:	<div>GREATER MANCHESTER</div>
Country:	<div>ENGLAND</div>	Country:	<div>ENGLAND</div>
Postcode:	<div>RG14 2FN</div>	Postcode:	<div>M3 3HF</div>

### 3. Site Address Details

Please provide the full postal address of the application site.

Unit: ☐ House number: ☐ House suffix: ☐

House name: ADOPTED GRASS VERGE ON LONG LAKE

Address 1: OUTSIDE LONG LAKE RECREATION GROUND

Address 2:

Address 3:

Town: LIVERPOOL

County: MERSEYSIDE

Postcode (optional): L19 6PN

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

Easting: 340337 Northing: 385271

Description:

n/a

### 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:

Reference:

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

19/02/2013

Details of pre-application advice received?

NO RESPONSE RECEIVED TO DATE.

### 5. Telecommunications Apparatus

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

THE INSTALLATION OF A 15 METRE HIGH SLIM-LINE STREETWORKS COLUMN WITH 3 NO. SHROUDED ANTENNAS; INSTALLATION OF 1 NO REPLACEMENT EQUIPMENT CABINET AND 2 NO ADDITIONAL EQUIPMENT CABINETS AT GROUND LEVEL.

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

THE REPLACEMENT COLUMN WILL BE 15 METRES IN HEIGHT.  
THE CABINETS HAVE THE FOLLOWING MEASUREMENTS: ALTELLS COMBIBOX CABINET = 750mm x 350mm x 1131mm;  
HUAWEI BTS 3800AL = 770mm x 750mm x 1925mm; ALTELLS VULCAN CABINET = 1858mm x 798mm x 1618mm

Are you replacing an existing installation? ☒ Yes ☐ No

If Yes, please provide further details of the existing apparatus (e.g. height, size, colour etc):

THE REMOVAL OF THE EXISTING 12 METRE COLUMN (TOP HEIGHT OF 14.4 METRES) WHICH IS GREY IN COLOUR AND THE REMOVAL OF 1 NO. EXISTING CABINET AT GROUND LEVEL.

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 Annex F 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:

THE FOLLOWING PARTIES HAVE BEEN CONSULTED:  
COUNCILLOR R OGILTHORPE; COUNCILLOR B JONES;  
COUNCILLOR M ASPINALL; MRS M EADIE MP.

## 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 has been submitted.

The original and 3 copies of a completed and dated prior notification form:



The correct fee:



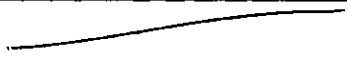
The original and 3 copies of the location plan to a scale not less than 1:2500:




## 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):

04/03/2013

(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):

## 12. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land?



If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one)



If Other has been selected, please provide:

Contact name:

Telephone number:

Email address: