PART 1 Of The Planning Register

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MANCHESTER CITY COUNCIL

Planning
PO Box 463, Town Hall Extension
Manchester M60 3NY
Tel: 0161 234 4516 Fax: 0161 234 4508
Email: planning@manchester.gov.uk

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

Publication of planning applications on council websites

Please note that with the exception of applicant contact details and Certificates of Ownership, the information provided on this application form and in supporting documents may be published on the council's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the council's website, please contact the council'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):	TELEFÓNICA O2 UK LIMITED
Unit:	260
House number:	—
House suffix:	—
House name:	—
Address 1:	BATH ROAD
Address 2:	
Address 3:	
Town:	SLOUGH
County:	BERKSHIRE
Country:	ENGLAND
Postcode:	SL1 4DX

2. Agent Name and Address

Title:	—
First name:	—
Last name:	—
Company (optional):	LAMBERT SMITH HAMPTON
Unit:	79
House number:	—
House suffix:	—
House name:	—
Address 1:	MOSLEY STREET
Address 2:	
Address 3:	
Town:	MANCHESTER
County:	GREATER MANCHESTER
Country:	ENGLAND
Postcode:	M2 3LQ

3. Site Address Details

Please provide the full postal address of the application site.

Unit: — House number: — House suffix: —

House name: GRASS VERGE (OPPOSITE THREE ARROWS PUB)

Address 1: MIDDLETON ROAD

Address 2:

Address 3:

Town: HIGHER BLACKLEY, MANCHESTER

County: GREATER MANCHESTER

Postcode (optional): M24 4GY

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

Easting: 384224 Northing: 404701

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:

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):

THE OPERATOR INTENDS TO ERECT A 15 METRE SLIM-LINE MONOPOLE WITH 2 EQUIPMENT CABINETS.

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

THE COLUMN IS TO BE PAINTED GREY (TO BS 00 A 05) AND THE EQUIPMENT CABINETS ARE TO BE PAINTED GREEN (TO RAL 6009). THE DIMENSIONS OF THE COLUMN + CABINETS ARE NOTED ON THE ATTACHED DRAWINGS.

Are you replacing an existing installation? ☑ Yes ☐ No

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

THIS APPLICATION IS A REPLACEMENT TO O2'S EXISTING EQUIPMENT WHICH IS LOCATED ON A PYLON TO THE REAR OF BAGULEY CRESCENT, MIDDLETON. O2 HAS 3 ANTENNAS LOCATED ON THE PYLON STRUCTURE WITH SEVERAL GROUND BASED EQUIPMENT CABINETS.

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:

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.

3 copies of a completed and dated prior notification form: ☑ The correct fee: ☑

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.

Signed - Applicant:

Or signed - Agent: (BY AGENT LAMBERT SMITH HAMPTON)

Date (DD/MM/YYYY): 29/09/2008 (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:
	0161 242 8050	

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional): SBATCHELOR@LSH.CO.UK

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: