

## **Planning Group**

South Tyneside Council, Town Hall & Civic Offices, Westoe Road, South Shields, Tyne and Wear, NE33 2RL Email: planningapplications@southtyneside.gov.uk Tel: 0191 424 7421

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

## 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. Applic	cant Name and Address	2. Agent	Name and Address
Title:	First name:	Title:	First name: CIARA
Last name:		Last name:	DALY
Company optional):	ARQIVA	Company (optional):	DALY INTERNATIONAL
Jnit:	House House suffix:	Unit:	House number: House suffix:
louse name:		House name:	FAIRBANK HOUSE
Address 1:	CRAWLEY COURT	Address 1:	ASHLEY ROAD
ddress 2:		Address 2:	
ddress 3:		Address 3:	
own:	WINCHESTER	Town:	ALTRINCHAM
ounty:	HAMPSHIRE	County:	CHESHIRE
ountry:	ENGLAND	Country:	ENGLAND
ostcode:	SOZI 2QA THTYNESIDE COUNTY	Postcode:	WA14 20P

	ddress Details	4. Pre-application Advice	
Please provide the full postal address of the application site.  House House		Has assistance or prior advice been sought from the local authority about this application?	
Unit:	number: suffix:	les vivo	
House 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:	VICTORIA INDUSTRIAL ESTATE	application more efficiently).  Please tick if the full contact details are not	
Address 2:	VICTORIA ROAD WEST	known, and then complete as much as possible:	
Address 3:		Officer name:	
Town:	HEBBURN	Reference:	
County:	TYNE AND WEAR		
Postcode (optional):	NE31 IUB	Date: (DD/MM/YYYY)	
Description (must be co	n of location or a grid reference. Completed if postcode is not known):	(must be pre-application submission)	
	+30404 Northing: 563264	Details of pre-application advice received?	
Description			
*			
E Talas			
	ommunications Apparatus	all how mostly	
Please spec	cify the type of apparatus to be installed or altered (e.g. c	all box, masty.	
MON	WROLE WITH ANTENNA, EQUIPMEN	NT CABINETS.	
Please prov	vide further details of the apparatus (e.g. height, size, colo	our, etc):	
ONE	15m MONOPOLE WITH THREE ANTEN	WAS AT THE TOP, + TWO EQUIPMENT	
	WINETS AT THE BASE.		
Are you repl	lacing an existing installation?	☐ Yes ✓ No	
If Yes, pleas	se provide further details of the existing apparatus (e.g. h	eight, size, colour etc):	
	omitting a declaration confirming that the apparatus is in		
	ments of the radio frequency (RF) public exposure guidel al Commission on Non-Ionizing Radiation Protection (ICN		
from all mol	bile phone network operators' equipment on the site mu		
account wn	en determining compliance.	J les   NO	
6. Supple	ementary Information	7. Neighbour and Community Consultation	
Are you also providing a completed Supplementary Information Template (as set out in Annex F of the Code of Best Practice on		Have you consulted your neighbours or the local community about the proposal?  Yes No	
wobile Phon	ne Network Development)?	If Yes, please provide details:	
	✓ Yes No	CLLR. MC ATOMINEY	
		CLLE MAKWELL	
		CLUR MCCABE	
	Lucius I		

8. Planning Application Requirements - Checklist	
Please read the following checklist to make sure you have sent all the information required will result in your application being deemed in the Local Planning Authority has been submitted.	e information in support of your proposal. Failure to submit all valid. It will not be considered valid until all information required by
The original and 3 copies of a completed and dated prior notification	n 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 t information. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.  Signed - Applicant:	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the  Or signed - Agent:
Date (DD/MM/YYYY):  O2   03   20   S . (date cannot be pre-application)	
Telephone numbers  Country code: National number: Extension number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):	Telephone numbers  Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):
	Ciara daly Qdalyinternational.com
12. Site Visit  Can the site be seen from a public road, public footpath, bridleway o  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:	r other public land? Yes No Agent Applicant Other (if different from the agent/applicant's details)  Telephone number:

Email address: