

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.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: First name:	Title: MR First name: JAMES
Last name:	Last name: CAIN
Company (optional): CTIL LTD AND VODAFONE LTD	Company (optional): JN PLANNING CONSULTANTS LTD
Unit: House number: House suffix:	Unit: House number: 5 House suffix:
House name:	House name:
Address 1: C/O AGENT	Address 1: SEYMER CLOSE
Address 2:	Address 2:
Address 3:	Address 3:
Town:	Town: SHILLINGSTONE
County:	County: DORSET
Country:	Country:
	T11 OPH

BR/210/15/TEL

Prior notification for the replacement of 6 No. existing antennas with 9 No. proposed antennas, replacement of 5 No. equipment cabinets with 6 No. proposed equipment cabinets plus minor ancillary apparatus.

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

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

Easting: Northing:

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: ☐

Reynolds Depository
Canada Grove
Bognor Regis

Date: (DD/MM/YYYY)

(must be pre-application submission)

Details of pre-application advice received?

LAA PROVIDED WITH PAE-APP PACK-
NO RESPONSE forthcoming

5. Telecommunications Apparatus

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

REPLACEMENT OF 6NO. EXISTING ANTENNAS WITH 9NO. PROPOSED ANTENNAS;
REPLACEMENT OF 5NO. EQUIPMENT CABINETS WITH 6NO. PROPOSED EQUIPMENT
CABINETS; PLUS MINOR AUXILIARY APPARATUS

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

ANTENNAS - STEEL / GREY
CABINETS - STEEL / GREY

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:

LOCAL CLUBS + PARISH COUNCIL
WERE CONSULTED WITH.

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:

[Redacted Signature]

Date (DD/MM/YYYY):

15/09/2015

(date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:

National number:

Extension number:

[Redacted]

[Redacted]

[Redacted]

Country code:

Mobile number (optional):

[Redacted]

[Redacted]

Country code:

Fax number (optional):

[Redacted]

[Redacted]

Email address (optional):

[Redacted]

11. Agent Contact Details

Telephone numbers

Extension number:

Country code: National number:

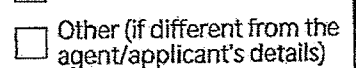
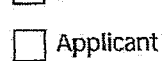
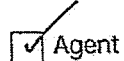
[Redacted]

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:

[Redacted]

Telephone number:

[Redacted]

Email address:

[Redacted]

Town and Country Planning (Development Management Procedure) (England) Order 2015 NOTICE UNDER ARTICLE 3 OF APPLICATION FOR PLANNING PERMISSION

(Notice 1: This notice is to be printed and served on individuals if Certificate B or C is completed)

Proposed development at:

Name or flat number	
Property number or name	THE DEPOSITORY
Street	CANADA GROVE
Locality	
Town	BOGNOR REGIS
County	WEST SUSSEX
Postal town	
Postcode	PO21 1DW

Take notice that application is being made by:

Organisation name	CTIL LTD AND UODAFONE LTD		
Applicant name	Title	Forename	
	Surname		

For planning permission to:

Description of proposed development

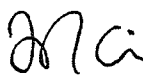
REPLACEMENT OF 6 NO. EXISTING ANTENNAS WITH 9 NO. PROPOSED ANTENNAS,
REPLACEMENT OF 5 NO. EQUIPMENT CABINETS WITH 6 NO. PROPOSED CABINETS.
PLUS MINOR ANCILLARY APPARATUS

Local Planning Authority to whom the application is being submitted: ARUN DISTRICT COUNCIL

Local Planning Authority address: PLANNING SERVICES
CIVIC CENTRE
MALTRAVEN ROAD
LITTLEHAMPTON, WEST SUSSEX BN17 5LF

Any owner of the land or tenant who wishes to make representations about this application, should write to the council within 21 days of the date of this notice.

Signatory:

Signatory	Title	MR	Forename	JAMES
	Surname	CAIN		
Signature				

Date (dd-mm-yyyy) 14-09-2015

Statement of owners' rights: The grant of planning permission does not affect owners' rights to retain or dispose of their property, unless there is some provision to the contrary in an agreement or lease.

Statement of agricultural tenants' rights: The grant of planning permission for non-agricultural development may affect agricultural tenants' security of tenure.

'Owner' means a person having a freehold interest or a leasehold interest the unexpired term of which is not less than seven years.

'Tenant' means a tenant of an agricultural holding any part of which is comprised in the land.

Once completed this form needs to be served on the owner(s) or tenant(s)

Print Form