FOR OFFICE USE

Application No. .....

Date Received .....

Fee Paid .....

BARNSLEY
Metropolitan Borough Council

Planning and Transportation Service, PO Box 604, Barnsley S70 9FE

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 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:	MR	First name:	KEVIN		
Last name:	BLACKSHAW.				
Company (optional):	KCOM GROUP				
Unit:		House number:		House suffix:	
House name:	NEC				
Address 1:	VULCAN STREET				
Address 2:	CLOUGH ROAD.				
Address 3:					
Town:	HULL				
County:	EAST YORKSHIRE				
Country:					
Postcode:	HU6-7PS				

2. Agent Name and Address

Title:		First name:			
Last name:					
Company (optional):					
Unit:		House number:		House suffix:	
House name:					
Address 1:					
Address 2:					
Address 3:					
Town:					
County:					
Country:					
Postcode:					

3. Site Address Details

Please provide the full postal address of the application site.

Unit: | House number: | House suffix:

House name:

Address 1: O/S 1 VICTORIA ROAD

Address 2:

Address 3:

Town: BARNSLEY.

County:

Postcode (optional): S70-2LS

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

Easting: 434282 Northing: 406844

Description:

SEE PHOTO FOR LOCATION

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):

TELECOMS STREET CABINET (WITH POWER)

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

COLOUR TO BE CONFIRMED WITH BMBC (SPEC TO BE PRIOR)
SIZE H: 1425 W: 1140 D: 480
MAINTENANCE PROGRAMME TO BE PUT IN PLACE (TBC)

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 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:

BMBC HAVE APPROVED THE PROJECT

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~~ 500: ☑

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: [redacted]

Or signed - Agent:

Date (DD/MM/YYYY): 07/08/2009. (date cannot be pre-application)

10. Applicant Contact Details

Telephone numbers

Country code:	National number:	Extension number:
01482	602098	

Country code: [ ] Mobile number (optional): [redacted]

Country code: [ ] Fax number (optional): [ ]

Email address (optional): kevin.blackshaw@tcom.com

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? ☑ 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: [ ]