**GDO - Telecommunications**

ENPA Planning Admin

Validation Checklist

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Validation Ref No:** | | | | | | | |  | | | |
| **Date of Admin Validation:** | | | | |  | | | **Administrator:** | |  | |
| **Date of Officer Validation:** | | | | |  | | | **Validation Planning Officer:** | |  | |
| **Valid:** | | **YES/NO** | | | **Valid Date:** |  | | **Date Returned:** | |  | |
| **Application Case Officer:** | | | | |  | | | **Screening Assessment Required** | | **YES/NO** | |
|  |  | | | | | | | | | |  |
| **Site Address** | | |  | | | | | | | | |
| **Proposal** | | | Prior notification for…. | | | | | | | | **YES/NO** |
|  | | | | | | | | | | | |
| **Constraints Checked** | | | | | | | | | | | |
| **Parish** | | | |  | | | **Conservation Area** | | YES/NO | | |
| **Listed Building** | | | | YES/NO | | | **SSSI Site** | | YES/NO | | |
| **Flood Zones** | | | | YES/NO | | | **Rights of Way** | | YES/NO | | |

|  |  |  |
| --- | --- | --- |
| **National Requirements** | | |
| **Checklist Item** | **Admin Comment** | **Officer Comment** |
| Application Form |  |  |
| Location Plan |  |  |
| Fee |  |  |
| Evidence |  |  |
| Notification |  |  |
| ICNIRP Statement |  |  |