

**Peter Davies**

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**From:** [REDACTED]  
**Sent:** 18 June 2025 17:05  
**To:** planninginfo  
**Cc:** Malcolm Avery (Cllr); Jim Knight (Cllr)  
**Subject:** DM/25/1495 - objection

[REDACTED]

**DM/25/1495** The installation of a 22.5 metre lattice mast, mounted with 9No. antennas, 12No. cabinets, 1No. Electrical meter cabinet located within a compound comprised of 2.4 metre high chain-link fence topped with 3 strands of barbed wire and the creation of a new access from Rocky Lane and ancillary development thereto. Land Adj. To Rocky Lane Haywards Heath West Sussex <https://pa.midsussex.gov.uk/online-applications/applicationDetails.do?activeTab=summary&keyVal=SXLIG4KT04L00>

Please ensure the following is noted and placed on your planning portal as an objection. Kind regards,

[REDACTED] 18 Bolding House, West End, Woking, Surrey GU24 9JJ

Since this would be a new mast, please ensure it is treated as a Prior Approval application which should be fully adjudicated as any other planning application under GPDO of the Town and Country Planning Act 1990. According to 'Changes to permitted development rights for electronic communications infrastructure: technical consultation' of 7 March 2022, paragraph 10, new ground based masts: All new masts still require the Prior Approval of the Local Planning Authority, and consideration of community representation. <https://www.gov.uk/government/consultations/changes-to-permitted-development-rights-for-electronic-communications-infrastructure-technical-consultation/outcome/changes-to-permitted-development-rights-for-electronic-communications-infrastructure-government-response-to-the-technical-consultation>

As a frequent visitor to the area, I **object** to such a monstrously tall ugly mast and its associated ground cabinets that will create visual and physical obtrusive clutter, continuous noise from the cabinets, dominate and degrade the aesthetics of the local area; The large size and utilitarian appearance of the proposed equipment would appear to be out of scale and overly prominent within its immediate setting and from some short and medium distance.

- **Appearance & Site**: This would severely impact the skyline. In close proximity to residences, businesses where folk including children would be involuntarily subjected to high levels of harmful radiation beaming from this mast throughout the day and night.

[www.sciencedirect.com/science/article/abs/pii/S0013935122011781](https://www.sciencedirect.com/science/article/abs/pii/S0013935122011781). The size and impact of this proposed development is contrary to NPPF (2023) paras 128 & 131 which aims for well-designed, beautiful places, sympathetic to its history and character; and engagement with community representation. The mast installation may create a visual distraction and its associated equipment cabinets would clutter and degrade the look and feel of the area. It is contrary to Code of Practice Para 22 and 28, with the siting of the proposed mast representing a discordant, intrusive feature to the prevailing residential and semi-rural character of the surrounding area.

- is likely to increase fear of harm and anxiety while the science shows the emitted radiation may harm humans and all life, and there are NO long term safety studies on cumulative effects over a life-time, from

this untested, unregulated, experimental technology. This technology uses microwave radiation aka Radio Frequency Radiation / Electro-Magnetic Field (RFR/EMF).

- Once installed, Telecoms may 'upgrade' to a higher mast with a mere 'notification' without any consultation to the community, under GPDO rules. These hideous masts do not belong in residential areas.

This is a SPECULATIVE application with no MNO signed up yet.

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### **Environment, Biodiversity Net Gain, Sustainability, Climate and Carbon targets**

How does this fit Environment, Biodiversity Net Gain, Sustainability, Climate and Carbon targets? As Local Planning authorities you have the duty to help preserve the natural environment for the benefit of future generations. This infrastructure is for a power-hungry technology, that emits radiation pollution, creates a huge carbon footprint; requires the mining of many rare earth minerals, often using child labour; and would release vast amounts of greenhouse gases. There is NO certificate protective of wildlife and plants including trees. Many studies link the declining insect population to EMF radiation.

Such telecommunications technology is contrary to any '**Climate Change**' Action Plan. Each 5G mast requires approximately 3 times more power than a 4G mast (as much as 73 typical homes). Given the current energy reduction message for us (reduce heating, wear an extra jumper, etc), why are you considering these energy hungry monsters? 5G's Waveform Is a Battery Vampire - IEEE Spectrum  
<https://www.fiercewireless.com/tech/5g-base-stations-use-a-lot-more-energy-than-4g-base-stations-says-mtn> <https://envirotecmagazine.com/2021/11/08/how-green-is-5g/>  
<https://theecologist.org/2020/apr/30/smart-techs-carbon-footprint>

<https://www.imperial.ac.uk/news/199433/cloud-computing-could-producing-hidden-greenhouse/>

With 5G's greatly increased mobile traffic, electricity usage from telecommunications could create up to 23% of global greenhouse gas emissions by 2030; power demand would be the equivalent of 36 nuclear reactors or 7800 massive offshore wind farms worldwide. - [www.mdpi.com/2078-1547/6/1/117/htm](http://www.mdpi.com/2078-1547/6/1/117/htm) - [www.wsimag.com/science-and-technology/64080-green-5g-or-red-alert](http://www.wsimag.com/science-and-technology/64080-green-5g-or-red-alert)

The France, Spain and California Green Parties, the France Climate Change Council, and Greenpeace East Asia have all warned of the climate footprint of 5G.

The French Climate Council states that an extra 7 billion tonnes of carbon dioxide could be released into the atmosphere by 5G -[www.france24.com/en/europe/20201220-deploying-5g-will-lead-to-spike-in-co2-emissions-french-climate-council-warns](http://www.france24.com/en/europe/20201220-deploying-5g-will-lead-to-spike-in-co2-emissions-french-climate-council-warns)

Legal firm Client Earth and telecoms consultants Strand Consult have expressed concerns about greenwashing by providers.

[www.clientearth.org/media/wbglw3r3/clientearth-accountability-emergency.pdf](http://www.clientearth.org/media/wbglw3r3/clientearth-accountability-emergency.pdf)

Have you considered recycling plans in place for these masts at the end of their life? Both the poles, masts, satellites and interconnecting devices will require untold mining of rare earth minerals, contrary to any '**Green**' initiative' or '**Climate Crisis**' Action Plan. Please consider the implications of this infrastructure from extraction, processing, usage and disposal of the materials for masts and devices.

<https://www.sussex.ac.uk/about/sustainable-university/news-and-events/news?id=57164>

Will increase airborne Radio Frequency Radiation / Electro-Magnetic Field (RFR/EMF) pollutants contrary to any '**Clean Air Initiative**';

**BioDiversity Net Gain:** EMFs not only affect people, but also have detrimental effects on wildlife, trees and the ecosystem, see the following article <https://www.sciencedirect.com/science/article/abs/pii/>

The British Ecological Society has identified RFR as one of the top emerging issues that could affect global biological diversity and conservation. [https://www.cell.com/trends/ecology-evolution/fulltext/S0169-5347\(17\)30289-6](https://www.cell.com/trends/ecology-evolution/fulltext/S0169-5347(17)30289-6)

**Environment Impact Assessment:** Does the Council have any formal Environmental Impact report or assessment of 5G technology or this proposal? Under Environmental Law and the recent ruling against Surrey County council that emphasised the importance of public participation in environmental decision making, which is an objective not only of the EIA Directive but also central to the Aarhus Convention; the Court identified two issues in relation to public participation, namely: increasing the democratic legitimacy of environmental decision, and serving an educational function. An EIA should include the effects of the radiation emitted from all the antennae on the proposed mast (which can be regarded as effluvia or as a pollutant) on public health. An Environmental Impact Assessment should consider the implications of this infrastructure from extraction, processing, usage and disposal of the materials for masts and devices and include the radiation emissions.

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### **Public health effects:**

In 2011 radiofrequency electromagnetic fields (RF-EMF's) microwave radiation was declared a Class 2B possible carcinogen by the International Agency for Research on Cancer (IARC). They reported sufficient evidence of carcinogenicity in experimental animals for a 2B classification. [https://www.iarc.who.int/wp-content/uploads/2018/07/pr208\\_E.pdf](https://www.iarc.who.int/wp-content/uploads/2018/07/pr208_E.pdf) Technology in RF-EMF has advanced considerably since then and many scientists now urge that it should be upgraded to a Class 2A (probable) or Class 1 (known) carcinogen. <https://www.sciencedirect.com/science/article/abs/pii/S0013935122011781> The additions to electro-smog continue without any evidence of Safety. There are NO safety studies on the cumulative effects on health from exposure to these RF-EMF emissions 24/7 over a lifetime.

Indeed, the latest WHO systematic review 'Effects of Radiofrequency Electromagnetic Field Exposure on Cancer in Laboratory Animal Studies' (Mevisse et al.), published on April 25<sup>th</sup> 2025, concludes that there is "*evidence that RF-EMF exposure increases the incidence of cancer in experimental animals with the [certainty of evidence] being strongest for malignant heart schwannomas and gliomas*" (brain tumours). The review also found moderate certainty of evidence of an increased risk of rare tumours in the adrenal glands and in the liver. Although the study states that extrapolating the level of human risk of cancer from animal studies can be complex, it should be noted that the incidence of brain tumours are the biggest cancer killer of children and adults under 40 in the UK.

<https://www.sciencedirect.com/science/article/pii/S0160412025002338>

In several thousand studies, biological effects such as DNA damage have been shown to occur at exposure levels FAR BELOW the current guidelines. Studies show harm to people, wildlife and the environment. <https://icbe-emf.org/> and <https://www.orsaa.org/> and <https://bioinitiative.org/>

A recent 2024 paper by Hensinger & Budzinski shows the biological processes of how people become sufferers of electromagnetic radiation syndrome as a result of exposure to RF-EMF's

<https://ehtrust.org/why-electrohypersensitivity-ehs-is-a-biologically-expected-reaction-to-harmful-radiation/>

5G is a novel RF-EMF technology that includes directed energy in air, collimated, beam forming technology or polarised, pulsed and modulated Radio Frequency Radiation so does not obey the inverse square law of drop-off of radiation further from source, as do 2G, 3G and 4G. That means the beams of energy and their side lobes can travel miles at high intensity; while other 5G wave bands will incorporate the use of tiny millimetre waves that do not travel far but can penetrate deeper. Transmitter density required for 5G means that more people will be exposed to radio frequency electromagnetic fields (RF-EMFs), and at levels that emerging evidence suggests, are potentially harmful to health.

The Swisscom patent: The toxicity and polluting effects of such telecoms masts is known by Industry, see the patent application submitted by the large and well known Swiss telecom company, Swisscom. Extracts below, the application states in the beginning of paragraph 2:

*'The influence of electrosmog on the human body is a known problem. The health risk from mobile radio transmitters, handys and DECT telephones has been an explosive subject among the general public at least since the enormous breakthrough in mobile radio technology in the 1990s.'*

and further ‘*When, for example, human blood cells are irradiated with electromagnetic fields, clear damage to hereditary material has been demonstrated and there have been indications of an increased cancer risk*’

and continues: ‘*These findings indicate that the genotoxic effect of electromagnetic radiation is elicited via a non-thermal pathway. Moreover aneuploidy is to be considered as a known phenomenon in the increase of cancer risk.*’

Continuing to the beginning of paragraph 3: ‘*Thus it has been possible to show that mobile radio radiation can cause damage to genetic material, in particular in human white blood cells, whereby both the DNA itself is damaged and the number of chromosomes changed. This mutation can consequently lead to increased cancer risk. In particular, it could also be shown that this destruction is not dependent upon temperature increases, i.e. is non-thermal*’ <https://patents.google.com/patent/WO2004075583A1/en>

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Evidence of harm: There are 8 recently published case studies that demonstrate the real-life effect of 5G on human health. These clearly demonstrate 5G deployment is a serious public safety issue. The cases covered individuals living or working in close to 5G antennae and a young boy who suffered severe symptoms at school. The distances from the antennae range from 5m to 500m. Please see below.

The ICNIRP safety certificate: Correct compliance with the radiation standards is essential.

Telecommunication mast applications are accompanied by a certificate from the International Commission of Non-Ionising Radiation Protection (ICNIRP) as a vital Public Health safeguard. The ICNIRP sets guidelines but does not set any legal standards; is only advisory for the emissions of radiation from radio frequency radiation for adults; does not address cumulative effects over a lifetime and has no adjustment for foetuses, babies, children, those with medical or metal implants, or the electrosensitive. It is outdated; based only on heating or thermal effects measured over short time spans; this mast will radiate 24/7. It does NOT consider biological effects. The certificate is not a guarantee, has a disclaimer and there is no provision for monitoring emissions. There is plenty of evidence of harm below ICNIRP safety levels (see International Commission of the Biological Effects of EMF’s [icbe-emf.org] or ehtrust.org or rfinfo.co.uk).

<https://ehjournal.biomedcentral.com/articles/10.1186/s12940-022-00900-9> From ICNIRP’s own website – ICNIRP does not issue certificates to verify the safety of any device or installation. Any such certificates and declarations are issued independently of ICNIRP, and ICNIRP does not evaluate their accuracy. <https://www.icnirp.org/en/activities/news/news-article/certificate.html>

Further, any certificate complying to ICNIRP guidelines (2020) 2<sup>nd</sup> page specifically **excludes those individuals with metal in their body or an active medical device**. The Guidelines state that people with "implantable medical devices" and "metallic implants" in the body are "outside the scope of these guidelines".

*There are many scenarios in which metal is used in the human body for medical reasons: metal pins, plates, rods, discs, screws, joint replacement of knees and hips. Stents for urinary, gynaecological and intestinal repairs, mesh repairs and copper contraceptive coils, implantable heart loop recorders, stents and pacemakers. Implants to treat and monitor health conditions, deliver drugs or to restore bodily functions. Magnetic cerebral spinal fluid shunts. Cochlear implants for hearing loss. Dental braces, implants, metal crowns, pins, denture arches, mercury amalgam fillings. And body piercings.*

Would they be supportive if they were aware of the fact that the 1998 ICNIRP document states that people with the following medical devices fall outside the scope of the guidelines:

“Compliance with the present guidelines **may not necessarily preclude interference with, or effects on, medical devices such as metallic prostheses, cardiac pacemakers and defibrillators, and cochlear implants**. Interference with pacemakers **may occur at levels below the recommended reference levels**. Advice on avoiding these problems is beyond the scope of the present document but is available elsewhere (UNEP/WHO/IRPA1993). These guidelines will be periodically revised and updated as advances are made in identifying the adverse health effects of time-varying electric, magnetic and electromagnetic field.”

Also reflected in the revised 2020 Guidelines

**“PURPOSE AND SCOPE:** The main objective of this publication is to establish guidelines for limiting exposure to EMFs that will provide a high level of protection for all people against substantiated adverse health effects from exposures to both short- and long-term, continuous and discontinuous radiofrequency EMFs. **However, some exposure scenarios are defined as outside the scope of these guidelines.** Medical procedures may utilize EMFs, and **metallic implants may alter or perturb EMFs in the body, which in turn can affect the body both directly (via direct interaction between field and tissue) and indirectly (via an intermediate conducting object).** For example, radiofrequency ablation and hyperthermia are both used as medical treatments, and **radiofrequency EMFs can indirectly cause harm by unintentionally interfering with active implantable medical devices (see ISO 2012) or altering EMFs due to the presence of conductive implants.**”<https://www.icnirp.org/cms/upload/publications/ICNIRPrfgdl2020.pdf>

Unless some sort of local risk assessment has been performed to demonstrate the contrary, it is highly likely that the ICNIRP certificate does not cover a large proportion of the local residents. Such people are particularly vulnerable and need to be afforded extra protection under the council's obligations within the **Health and Social Care Act 2012**. If there is no disability impact assessment in relation to this technology, it could be argued that provisions of the **Equality Act 2010** may well have been broken. This is an acute Public Health & Safety issue that applies to a large portion of residents which needs to be taken into account and is recognised by UKSHA. <https://www.icnirp.org/cms/upload/publications/ICNIRPrfgdl2020.pdf>  
<https://www.ukhsa-protectionservices.org.uk/nir/concerns/>

To accept a self-certified ICNIRP certificate, the Council should have satisfied itself that it understands the relevant technical details in their accepting of such a certificate (as they would a building certificate for example). The Council might enquire into the power outputs of the antennae concerned and also ask the applicant to supply the power drop off over distance calculations so as to fully assess the power of the main beam and the side lobe beams against the ICNIRP guidelines exposure of  $1\text{mw}/\text{cm}^2$  for 6 or 30 minutes. Can the Council supply the relevant proof they have done this before accepting the ICNIRP certificate?

Please provide a Risk Assessment on cumulative levels of EMF radiation exposure to include all sources of background radiation and combined or overlap with other local masts and show all exclusion zones. It is impossible to properly evaluate the safety of the proposed mast without the required technical information and drawings showing the Public Exclusion Zones, missing from the application.

Alternative Safety Guidelines: The ICNIRP sets a safe distance from a mast as roughly 50m, but the ICNIRP does not take into account biological effects whereas the New Hampshire Commission recommendation of 500m accounts for the large body of evidence showing harm within 500m. The year-long New Hampshire Commission of scientists, doctors and experts in physics, toxicology, electro-magnetics and epidemiology concluded unanimously that both the laboratory science and epidemiology converge are conclusive; all residents within 500m are vulnerable to these harmful effects. The Commission also point out that sufferers of electromagnetic radiation syndrome (3-5% of the UK population) are likely to suffer harmful effects even beyond this distance. The full transcript with 15 recommendations can be downloaded here:

<https://www.gencourt.state.nh.us/statstudcomm/committees/1474/reports/5G%20final%20report.pdf> The recommendation required that wireless telecommunications antennas to be placed at least 1,640 feet / 500m from residents, playgrounds, hospitals, nursing homes, day care centres and schools. This is evidence based and therefore applies globally. <https://www.youtube.com/watch?v=DWK74ie7krc> <https://rfinfo.co.uk/new-hants-commission/>

ICNIRP's stance and their guidelines are supported by only a few interconnected European committees, but vehemently opposed by many scientists and organisations across the globe. One such scientist is Professor Lennart Hardell, who found in his eight real-life 5G studies that people developed serious symptoms very soon after being exposed to radiation at levels very much lower than the ICNIRP guidelines in their accommodation. At even lower levels still, when there may only be general symptoms such as chronic fatigue or persistent flu-like symptoms, it has been clearly proven that oxidative stress occurs in the body over time and this can lead to a range of diseases such as cancer. In addition, hundreds of scientists have

recently called for a moratorium on 5G, until the health effects are properly investigated. These include the signatories of the EU 5G appeal, the EMF scientist appeal and the EMF Call. There is also the compelling 2020 Consensus Statement of UK and international, medical and scientific experts on the health effects of non-ionising radiation, signed by organisations representing 3,500 medical doctors throughout the world, initiated by the Physicians' Health Initiative for Radiation and Environment in the UK (PHIRE) and the newly-formed organisation, the International Commission on the Biological Effects of Electromagnetic Fields (ICBE-EMF) produced a critique of the ICNIRP safety guidelines and its 14 flawed assumptions last year, appealing for a moratorium on 5G.

<https://www.saferemr.com/2018/02/effects-of-exposure-to-electromagnetic.html>,  
<https://www.5gappeal.eu/scientists-and-doctors-warn-of-potential-serious-health-effects-of-5g/>,  
<https://emfscientist.org/index.php/emf-scientist-appeal>, <https://www.emfcall.org/the-emf-call/>,  
<https://phiremedical.org/2020-nir-consensus-statement-read/>,  
<https://ehjournal.biomedcentral.com/articles/10.1186/s12940-022-00900-9>

James Lin, ex-ICNIRP member states ICNIRP is not protective. ICBE-EMF – see webinar <https://icbe-emf.org/activities/webinar-june-14-2023/>

Is the council able to evidence that you have adequate information to clarify the technical proposal and substantiate the ICNIRP certificate: *calculations showing cumulative effects (taking into account other local sources, analysis of hotspots). Evidence of how vulnerable groups are screened and protected, as per NPPF (2023) 121b?*

No Exclusion zones are defined on the drawings and plans, please supply.

Will the Council as LPA, evidence their consideration of risks to those with metal implants?

How will the Council as LPA monitor and regulate the RF-EMF emissions to ensure the levels are within the ICNIRP guidelines?

The fact that any antenna are possible RF-EMF radiation hazards, causes fear, anxiety, alarm and distress for those living close to a mast and as such these health effects and perception of health risks can be a material planning consideration on the grounds of siting. The **weight** to be attached to this issue must be determined accordingly in **each** case by **the decision maker**.

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### **Legal matters**

For your awareness:

At a Judicial Review challenge in 2021 – Brighton & Hove City Council (BHCC) and the 'Fishersgate' mast outside a school, BHCC conceded on 3 grounds including '*the council failed to address the health impacts of this particular proposal and to obtain adequate evidence of the assessment of the proximity to the school and the amended proposal*' costing them over £13k in costs.. This clearly shows that Local Planning Authorities need to address health impacts of 5G masts beyond blindly accepting self-certified ICNIRP certificates. The applicant for the planning application was **CK Hutchison (UK) Ltd** now renamed as Cignal Infrastructure (UK) Ltd.

[https://planningapps.brighton-hove.gov.uk/online-applications/files/D8D92504AA0903E71E51DEEC967AC6C0/pdf/BH2021\\_01639-OFFICER\\_REPORT-16499342.pdf](https://planningapps.brighton-hove.gov.uk/online-applications/files/D8D92504AA0903E71E51DEEC967AC6C0/pdf/BH2021_01639-OFFICER_REPORT-16499342.pdf)

<https://rfinfo.co.uk/wp-content/uploads/2021/11/Consent-Order-02.11.21.pdf>

In 2022 the Mendip Planning Board weighed up arguments presented by experts and set an example of a positive decision by rejecting a 5G mast upgrade on **health grounds** on March 16<sup>th</sup> due to concerns on the impact to public health for all ages and lack of backed up evidence of safety. They concluded that the threshold of evidence was sufficient as a Material Planning Consideration to counter the ICNIRP self

certified submission and merited a precautionary refusal. Ref 2021/1951/FUL <https://rfinfo.co.uk/mendip-council-health-impact-based-mast-refusal/>

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In a recent 2024 Judicial Review defended by Cheltenham Borough Council, the Judge ruled that LPA's have an obligation to assess the health effects of cumulative EMF's due to ICNIRP's guidelines explicit exclusion of folk with metal implants. Judge Jarman ruled, in relation to a local care home, that the existence of a Declaration of Conformity was not sufficient with regard to those with metal implants, and that, "*The failure on the part of the local authority to grapple with potential impacts on medical implants was, in my judgment, an error and this ground succeeds*".

<https://www.sharpepritchard.co.uk/latest-news/navigating-4-5g-mast-objections-thomas-v-cheltenham-borough-council>

<https://www.bailii.org/ew/cases/EWHC/Admin/2024/1035.html>

Further to this case, at Appeal brought by Cheltenham LPA, the judges emphasized that ICNIRP does not address risks to those with metal implants; that Planning Officers should NOT ignore EMF effects on medical devices; and despite these effects not automatically being material planning considerations, LPA's should properly evaluate objections based on scientific evidence.

<https://caselaw.nationalarchives.gov.uk/ewca/civ/2025/259> <https://becivil.co.uk/case-notes/cheltenham-borough-council-v-thomas-2025-ewca-civ-259/>

In 2022 sensitivity to RF-EMF's in a child was recognised by the UK tribunal courts as a disability, resulting in the local East Sussex County Council being required to provide special measures to protect the child from wireless devices and Wi-Fi signals while at school.

<https://www.localgovernmentlawyer.co.uk/education-law/394-education-news/51400-upper-tribunal-requires-council-to-secure-ehcp-for-student-who-is-hypersensitive-to-wi-fi-signals> As areas become more saturated in radio-frequency electromagnetic radiation, it is likely that people's health will deteriorate, with an increasing number who cannot function normally.

In Sweden electromagnetic hypersensitivity has been addressed nationally, accepted as a physical impairment, and a scheme is in place to improve home and working conditions for people who consider themselves to be sufferers.

Control of Electromagnetic Fields At Work Regulations 2016 (CEMFAW) UK: organisations with five or more employees need to complete an EMF risk assessment. This is a statutory requirement, and in line with the **Management of Health and Safety at Work Regulations 1999**. Working environments or equipment that may generate significant electromagnetic fields include radiofrequency field (RF) transmitting equipment. It is important for these to demonstrate compliance with the Electromagnetic Field at Work Regulations 2016 (Statutory Instrument 2016 No. 588). Electromagnetic Field advice states the adverse health effects range from headaches, nausea and nerve stimulation for low frequency exposure; to RF burns, heatstroke and hyperthermia at high frequencies. RF-EMFs at work have the potential to interfere with medical devices, causing significant problems. Hence, special considerations exist for 'workers at particular risk' with metal implants, pacemakers, defibrillator, or other implanted medical device, ICDs, and pregnant women. Should the council consider the general public are worthy of these protective measures in their daily activities as are applied to workers in their working environment?

Please consider the likely increase in **Statutory Nuisance Complaints** from the accumulations of EMF's that could present harm to human health.

<https://www.sciencedirect.com/science/article/abs/pii/S0013935122011781>

Since 2000, when the UK government commissioned The Stewart Report that recommended the precautionary principle be applied to radio frequency radiation, have the government and local authorities failed in their duty to protect health? It is wholly the intention of the Planning Acts to include the above as

material considerations in any planning application as there can be nothing more important than the safety of the public and the protection of the environment [legal test: *‘in certain circumstances there will be some matters so obviously material to a decision on a particular project that anything short of direct consideration of them by ministers... would not be in accordance with the intention of the Act’* – Landmark Chambers In Re Findlay (1985) p 334] <https://www.landmarkchambers.co.uk/wp-content/uploads/2018/11/JN-Material-Consideration.pdf>

I assert the proposal contravenes **Article 8 of the Human Rights Act**: the right to respect of one's private and family life would be curtailed due to fear, anxiety, distress and likely injury from the harmful effects of radiation and the oppressive nature of this hideous proposal. <https://phiremedical.org/wp-content/uploads/2020/11/2020-Non-Ionising-Radiation-Consensus-Statement.pdf> Under **Article 6**, local residents and third parties who have made representations have a right to a fair hearing and to this end the local planning authority must give full consideration to their comments.

In a situation when scientific studies on EMF and health are of known and proven insufficient quality, what is the scientific, ethical and moral responsibility of scientists, our political representatives, the regulators and the telecom industry, when they claim that human health safety is already assured? Please apply the precautionary principle and refuse this mast.

### **European Electronics Communications Code:**

Further may I draw your attention to the legal challenge to UK government filed on 12 Sep 2023 (case number Z2309835.) It's a lengthy legal document, but breaks down, with Appendix 2 being easier to follow.

It details that LPA's are competent authorities under the European Electronics Communications Code (EECC) and have to make evidence-based decisions on the material planning consideration 'incompatible and unacceptable' use, the ICNIRP certificate being evidence of Public Health safety. Other evidence must be weighted alongside this, in order to fulfil the procedural standard laid out in the EECC transposed into UK Law in December 2020.

<https://safetechinternational.org/new-legal-challenge-uk-govt-fail-to-enact-public-health-environmental-obligations-within-european-electronics-communications-code/>

Another version of the same can be found here:

<https://rfinfo.co.uk/the-uk-government-are-failing-to-regulate-wireless-radiation/>

### **NPPF policies** version Dec-2023

Health effects should be addressed as a material planning consideration despite NPPF para 118, which is in conflict with para 174, 179, 180 & 185 which are protective of our health, living conditions and the natural environment.

**NPPF 119** : Cell need and sharing. Applicant must demonstrate that existing 3-4G masts **do NOT** give adequate coverage – inability to phone a landline from the site – in order to prove need for further masts. 5G infill is usually not justified.

**NPPF 121b** : Please ask the applicant to provide further information to clarify the technical proposal and substantiate the ICNIRP certificate: *calculations showing cumulative effects (taking into account other local sources, analysis of hotspots). Evidence of how vulnerable groups are screened and protected.* No Exclusion zones are defined, please supply.

**NPPF 121a**: little evidence of adequate consultation with nearby schools and residents. Schools are consulted during the planning application process, but children are equally vulnerable in their homes, as are pregnant women and pre-school children. It is important to respect the 500m setback distance to protect pregnant women and pre-school children.

**NPPF 121b** , EMF Cumulative levels. How did the applicant work these out? Will the Council check after installation and full switch-on that the ICNIRP standard emissions are within the limit? How will you test for cumulative levels in this location, the cumulative exposure from multiple masts is something that the NPPF refers to. Please provide a **Risk Assessment** from the council or the service provider that assesses the cumulative exposure with regard to thermal and **non-thermal** or biological effects.

**NPPF 122** : Planning grounds must be supported by the LPA. Despite NPPF 122 being specifically worded, **no single policy** can be treated as statute (Lord Gill in Supreme Court ruling *Wright v Resilient Energy Severndale Ltd & Forest of Dean council* 2019). Recent evidence supports these cases as exceptional and merit lawful considerations above policy.

The evidence for harm to health and the environment from next generation 5G Telco masts represents an incompatible & unacceptable use of land, as per the Town & Country Planning Act 1990. As such the evidence must be evaluated, under both Prior Approval and Full Planning, as a material planning consideration when assessing the siting of the mast.

To be 'material', considerations have to be applicable 'in situ' and evidenced as such. Elements of the NPPF may be 'material', subject to an 'in situ' evaluation of their actual relevance.

The applicant claims compatible use, we provide evidence of incompatible use.

**NPPF 191 (185)** also requires consideration of 'cumulative' effects. This must necessarily include other sources of background radiation. Any application that cannot adequately demonstrate this full consideration of 'in-combination' effects may be subject to a legal challenge (See case law: *Wealden DC v. Secretary of State for CLG, Lewes DC and SDNPA*)

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### **Insurance and Liability**

Could the council be vulnerable to liability costs both from future claims from residents suffering harmful effects of wireless radiation and from Judicial Review proceedings? Consider a breach of Health or Safety by any mast installation, such as fire in antennas of cabinets; emissions causing ill-health; falling down, etc. Would the council as the LPA with powers to grant or refuse such applications have any liability in the event of a breach of health or safety in regard to these telecommunication installations? Who would be liable in the event of a breach of health or safety with these installations? Please provide the exact clause in the council's Public Indemnity Insurance or similar that shows the council is indemnified against claims for harms caused by the telecoms installation EMF emissions.

Insurance companies do not insure against harm caused by electromagnetic fields (EMFs) or radio-frequency radiation (RFR). Insurance companies compare RFR-EMF with asbestos and tobacco as an emerging risk and will not insure for health damage. The ICNIRP and UK Health Security Agency (formerly PHE) guidelines do not provide safety assurances which can be relied upon for liability purposes. See Swiss Re in their Emerging Risks Report (May 2019):

*"To allow for a functional network coverage and increased capacity overall, more antennas will be needed, including acceptance of higher levels of electromagnetic radiation. In some jurisdictions, the rise of threshold values will require legal adaptation. Existing concerns regarding potential negative health effects from electromagnetic fields (EMFs) are only likely to increase. An uptick in liability claims could be a potential long-term consequence... Other concerns are focused on cyber exposures, which increase with the wider scope of 5G wireless attack surfaces. Traditionally IoT devices have poor security features. Moreover, hackers can also exploit 5G speed and volume, meaning that more data can be stolen much quicker."*

<https://www.swissre.com/institute/research/sonar/sonar2019/SONAR2019-off-the-leash.html>

<https://levaudsansantennes.ch/2019/04/20/lloyds-insurers-refuse-to-cover-5g-wi-fi-illnesses/>

Please note Wera Hobhouse MP for Bath wrote a letter dated 27 Feb 2020 to the DDCMS stating that any body relying on ICNIRP is liable not the guidance nor its issuer. Wera Hobhouse also points out that this technology is in itself not insurable.

Public Health England's solicitors (now UKSHA), DLA Piper confirmed in 2019 that a Local Authority needs to decide what weight to give to the ICNIRP guidelines and what weight to give to other evidence:

*.. "Guidance is not maintained and revised by PHE for the explicit purpose of any body undertaking any other statutory function. If in any other context regard is had to the Guidance that is entirely a matter for the discretion of the relevant body and **it must determine what weight to place on the Guidance given the clear indication as to the sources from which the advice and recommendations in the Guidance are derived. Equally, that body must determine what other evidence from members of the public or interested parties to consider in making any decision**"*

Please remember our recent history: Thalidomide, tobacco, asbestos, mercury, DDT and Glyphosate were all claimed to be safe for many years, causing untold suffering. Are RF-EMF's, especially 5G heading the same way?

A priority of the Council must be its **Duty of Care** to the local populace and the environment. In other words: cause no harm, loss or injury. Is this infrastructure for 5G/6G and beyond a democratising force for the public good or will it centralise power and profits for private interests? Please remember the Council's obligation is to your community first rather than to corporate lobbied government.

Does the Council and Planning Department consider they have all the knowledge, skill and competence to make a balanced judgement and risk assessment on each and every planning application for installations and upgrades of telecommunications towers, masts, and poles that emit radio-frequency radiation; taking into account 'all material considerations' as stated in many regulations for planning and for public service? These would include health, environment, sustainability, visual amenity, appropriateness of the site and location, the needs and desires of the local community, and the claimed service provision or improvement by the applicant. Can the proposed benefits outweigh the many varied risks and suffering?

This proposal indicates an incompatible use of the land. By virtue of the nuisance and credible harm or injury to the local residents and to the local area, being sufficient to outweigh the benefits of the development, the application should be refused.

**Evidence of harm:** With such a new technology as 5G, studies are few and far between. There are 8 recently published case studies that demonstrate the real-life effect of 5G on human health. These clearly demonstrate 5G deployment is a serious public safety issue. The cases covered individuals living or working in close to 5G antennae and a young boy who suffered severe symptoms at school. The distances from the antennae range from 5m to 500m. Please see below.

**1.** Hardell L & Nilsson M (2023) Case Report: The Microwave Syndrome after Installation of 5G Emphasizes the Need for Protection from Radiofrequency Radiation. *Annals of Clinical Case Report*. 8: 1112

*"In this case, report two previously healthy persons, a man aged 63 years and a woman aged 62 years, developed symptoms of the microwave syndrome after installation of a 5G base station for wireless communication on the roof above their apartment."*

[https://www.gavinpublishers.com/assets/articles\\_pdf/Case-Report-The-Microwave-Syndrome-after--Installation-of-5G-Emphasizes-the-Need-for--Protection-from-Radiofrequency-Radiation.pdf](https://www.gavinpublishers.com/assets/articles_pdf/Case-Report-The-Microwave-Syndrome-after--Installation-of-5G-Emphasizes-the-Need-for--Protection-from-Radiofrequency-Radiation.pdf)

**2.** Nilsson M and Hardell L (2023) Development of the Microwave Syndrome in Two Men Shortly After Installation of 5G on the Roof above their Office. *Annals of Clinical Case Report*. 8: 2378

*“In this case study we describe two men, case 1 and case 2, working in three office rooms close to base stations. After the deployment of 5G, both men developed symptoms typical for the microwave syndrome, e.g., headache, tinnitus, dizziness, balance disorder, concentration and attention deficiency, and fatigue.”*  
<https://www.anncaserep.com/open-access/development-of-the-microwave-syndrome-in-two-men-shortly-after-9589.pdf>

The above case study is mentioned here:

*'A new case study shows that installing a 5G base station on the roof above an office caused symptoms of microwave syndrome in two previously healthy men. The study is in line with a previous case study that also showed that 5G rapidly caused microwave syndrome in previously healthy people. These appear to be the first two studies in the world on the health effects of exposure to real 5G.'*

<https://www.stralskyddsstiftelsen.se/two-studies-show-that-5g-caused-the-microwave-syndrome-in-healthy-persons/>

**3.** Hardell L & Nilsson M (2023) Case Report: A 52-Year Healthy Woman Developed Severe Microwave Syndrome Shortly After Installation of a 5G Base Station Close to Her Apartment *Annals of Clinical and Medical Case Reports*. V10(16): 1-10

*“In this case report we present a woman aged 52 years who developed health problems consistent with the microwave syndrome after installation of a 5G base station facing her apartment at 60 meters’ distance. These symptoms consisted of e.g., headache, dizziness, concentration difficulties, fatigue, arrhythmia, skin burning and nose bleeding corresponding to the microwave syndrome”*

<https://acmcasereport.org/wp-content/uploads/2023/06/ACMCR-v10-1926.pdf>

**4.** Nilsson M & Hardell L (2023) 5G Radiofrequency Radiation Caused the Microwave Syndrome in a Family Living Close to the Base Stations. *Journal of Cancer Science and Clinical Therapeutics*. 7: 127-134

*“In this article we present a new case study of a family including three persons, a woman 55 years, a 20-year-old man and a 19-year-old woman. The fourth family member, the father, did not participate. All live in an apartment with two 5G/4G base stations directed towards their apartment, one at a distance of around 50 meters and the second at a distance of around 70 meters. The base stations are placed on the roof of two adjacent 6-floor buildings. The apartment of the family is located at a slightly lower height, on the fourth floor, in another building across the street”*

<https://www.fortunejournals.com/articles/5g-radiofrequency-radiation-caused-the-microwave-syndrome-in-a-family-living-close-to-the-base-stations.pdf>

**5.** Nilsson M & Hardell L (2023) Case Report - A 49-Year-Old Man Developed Severe Microwave Syndrome after Activation of 5G Base Station 20 Meters from his Apartment. *Journal of Community Medicine & Public Health*. 7: 382

*“The deployment of the fifth generation, 5G, for wireless communication has been rolled out in Sweden since 2019/2020. This has caused increased high-pulsed Radiofrequency (RF) radiation. In four case reports we have described persons that developed the microwave syndrome soon after installation of 5G base stations close to their residence or office. In this new case report a 49-year old previously healthy man is described. A 5G base station was installed 20 meters from his apartment. He rather immediately developed a variety of symptoms that are part of the microwave syndrome. Most severe were headache, dysesthesia (abnormal sensation), loss of immediate memory, high and irregular pulse, chest squeeze, burning and lancinating skin. Very high RF radiation was measured in his apartment, however much lower than the limits recommended by the International Commission on Non-Ionizing Radiation Protection (ICNIRP). After moving to another apartment with low RF radiation the symptoms disappeared or decreased within a short time period but they reappear whenever he returns to his apartment close to the 5G antennas. This must be regarded as a provocation test on health and 5G radiation.”*

[https://radiationprotection.se/wp-content/uploads/2023/11/microwave-syndrome\\_man49years\\_Nilsson\\_Hardell\\_nov2023.pdf](https://radiationprotection.se/wp-content/uploads/2023/11/microwave-syndrome_man49years_Nilsson_Hardell_nov2023.pdf)

**6.** Nilsson M & Hardell L (2023) Case Report: Both Parents and their Three Children Developed Symptoms of the Microwave Syndrome while on Holiday near a 5G Tower. *Annals of Clinical and Medical Case Reports*. V12(1): 1-7

“Antennas emitting radiofrequency (RF) radiation for 5G wireless communication are being deployed since 2019/2020 in Sweden, although no studies are available on health impacts from the new 5G radiation. In five case reports published during 2023 we have described that persons living or working close to 5G base stations developed the microwave syndrome soon after installation of the base stations. In this new case report we describe a previously healthy family of a man, a woman and their three children that rapidly developed symptoms of the microwave syndrome after arriving at a summer cottage located at 125 meters distance from a mobile phone tower with 5G antennas. The most severe symptoms for the adults were sleeping problems, headache, tiredness, and irregular heartbeat. The children got sleeping problems, diarrhea, pain in the stomach, skin rashes, headache, and emotional symptoms. All the symptoms disappeared and health was restored when the family returned to their own house at another place with no 5G base stations. No measurements were available inside or outside the cottage during the time the family stayed near the mast. Later measurement showed that the radiation level varied from 9000 to 43400  $\mu\text{W}/\text{m}^2$  outside the cottage on the 5G base station side, compared with 2500  $\mu\text{W}/\text{m}^2$  at most within their regular home without a 5G base station nearby. However, during their stay it is likely that the radiation was higher due to more mobile phone users staying at this summer cottage area. This case report is in line with results from our previous case reports showing that 5G rather rapidly may cause ill health and that elimination or reduction of 5G exposure restores health back to normal.”

<https://acmcasereport.org/wp-content/uploads/2023/12/ACMCR-v12-2046-1.pdf>

**7. Hardell L & Nilsson M (2024) A woman aged 82 years with Electromagnetic Hypersensitivity since Almost Four Decades Developed the Microwave Syndrome after Installation of 5G Base Stations in her Living Vicinity – Ethical Principles in Medicine are violated. *Journal of Environmental Science & Public Health*. 8: 01-08**

“Installation of the fifth generation (5G) for radiofrequency radiation started in Sweden in 2019/2020. Since then there has been a rapid development of this technology in the whole country. In previous case reports we have presented persons that developed the microwave syndrome caused by the radiation after installation of 5G in their neighborhood. Mostly these former healthy persons have tolerated previous generations such as 3G and 4G. After moving to another place without 5G the microwave syndrome disappeared in short time. Thus 5G seems to be a culprit for ill health, and these 5G exposure studies correspond to classic provocation tests on effects on well-being. This article presents a woman aged 82 years with electromagnetic hypersensitivity (EHS) since almost four decades. After deployment of 5G base stations close to her living place she developed severe ill health including fatigue, dysesthesia, dizziness, balance disorder, and light sensitivity that all are included in the microwave syndrome. Also her 83 years old husband was affected, although to a minor extent.”

<https://www.fortunejournals.com/articles/a-woman-aged-82-years-with-electromagnetic-hypersensitivity-since-almost-four-decades-developed-the-microwave-syndrome-after-instal.html>

**8. Hardell L, Nilsson M (2024) An Eight Year Old Boy Developed Severe Headache in A School Close to A Mast with 5G Base Stations. *Annals of Clinical Case Studies*. 2024; 6(1): 1093.**

“In this case study we present an eight-year boy who developed severe headache, but also some fatigue and dizziness at school after the implementation of 5G base stations close to the school. The RF radiation varied at the schoolyard between 83,332 and 267,536  $\mu\text{W}/\text{m}^2$  and in the classroom including corridor between 2,560 and 76,590  $\mu\text{W}/\text{m}^2$ . Considerably lower levels were found in the home varying from 25 to 1,040  $\mu\text{W}/\text{m}^2$ . Protective clothes had a preventive effect on his symptoms. This case study is another example of the immediate need to halt the expansion of 5G and dismantle existing base stations.”

<https://www.medtextpublications.com/open-access/an-eight-year-old-boy-developed-severe-headache-in-a-1582.pdf>

Science is a discipline of discussion and debate towards establishing facts. Without a causal mechanism for the adverse impact and effects of electromagnetic fields on the body, the real-life suffering is often dismissed. A new paper identifies the likely mechanism and connections to electromagnetic fields syndrome.

**Hensinger P & Budzinski B (2024) Why electrohypersensitivity (EHS) is a biologically expected response to harmful radiation *Umwelt-medizin-gesellschaft / environmental-medicine-society***

‘Is electrohypersensitivity (EHS) triggered by mobile phone radiation a fact or an imagination? It is understandable why the mobile phone industry declares this disease to be an illusion. For them, it is damaging to their business if their products are associated with the consequences of illness. But the authorities responsible for health and radiation protection also spread the word that EHS is a psychological, fear-ridden reaction. They deny any connection with radiation exposure and claim that there is no causal cause-and-effect mechanism. This article deals with existing evidence for this connection and with the demand for causality as a prerequisite for the recognition of a disease and also with why people with electrohypersensitivity are discriminated against.’

<https://www.forum-medizin.de/umwelt-medizin-gesellschaft>

<https://www.diagnose-funk.org/aktuelles/artikel-archiv/detail&newsid=2098>

SUMMARY of CASE STUDIES: Bevington M (2024) Health Concerns of 5G and Setting Suitable Restrictions.

*International Journal of Research in Biological Sciences* vol 1 issue 1:01-07

‘This Mini Review has two aims. The first is to analyse six case reports on actual health effects of 5G radiofrequency radiation (RFR), comparing the results with concerns for similar RFR. The second is to relate these reports to setting restrictions suitable for all, including for persons with intolerance to environmental RFR. Adverse health effects from 5G RFR occur below current thermal restrictions. Therefore, restrictions need to be at non-thermal levels based on a threshold, as for a No Observable Adverse Effect Level (NOAEL). Ecological evidence suggests a suitable restriction including a safety factor of ten should be set at 0.06  $\mu\text{W}/\text{m}^2$  (0.005 V/m).’

[https://www.researchgate.net/publication/378012223\\_Health\\_Concerns\\_of\\_5G\\_and\\_Setting\\_Suitable\\_Restrictions](https://www.researchgate.net/publication/378012223_Health_Concerns_of_5G_and_Setting_Suitable_Restrictions)

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