

Copeland Borough Council The Copeland Centre, Catherine Street, Whitehaven, Cumbria CA28 7SJ tel: 0845 054 8600 fax: 01946 59 83 03 email: info@copeland.gov.uk web: www.copeland.gov.uk

Application for prior notification of proposed demolition.

Town and Country Planning (General Permitted Development) Order 1995 Schedule 2 Part 31

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				
Title:	Mr. First name: Martin			
Last name:	Chown			
Company (optional):	Sellafield Limited			
Unit:	House House suffix:			
House name:				
Address 1:	Hinton House			
Address 2:	Birchwood Avenue			
Address 3:	Birchwood			
Town:	Warrington			
County:	Cheshire			
Country:	England			
Postcode:	WA3 6GR			

2. Agent Name and Address			
Title:	Mr. First name: Marc		
Last name:	Ross		
Company (optional):	Sellafield Limited		
Unit:	House number: House suffix:		
House name:			
Address 1:	Sellafield		
Address 2:			
Address 3:			
Town:	Seascale		
County:	Cumbria		
Country:	England		
Postcode:	CA20 1PG		

3. Site Address Details 4. Pre-application Advice					
Please provi	de the full postal address of the application site.	Has assistance or prior advice been sought from the local			
Unit:	House House suffix:	authority about this application?	No		
House name:	Trumber. Suma.	If Yes, please complete the following information about the a you were given. (This will help the authority to deal with this			
Address 1: Sellafield Site		application more efficiently). Please tick if the full contact details are not			
Address 2:		known, and then complete as much as possible:			
Address 3:		Officer name:			
Town:	Seascale	Reference:			
County:	Cumbria	neterence.			
Postcode (optional): CA20 1PG Description of location or a grid reference.		Date (DD/MM/YYYY):			
(must be co	mpleted if postcode is not known):	(must be pre-application submission)			
Easting:	Northing:	Details of pre-application advice received?			
Sellafield Site					
Seliali	eiu site				
(F. D.	In the second				
_	red Demolition Works ribe the building(s) to be demolished:				
		eel portal frame structure is around 13m x 13m and 6m high a	at		
		ladding rails with aluminium cladding on the outside. There is			
	ter door on the eastern side. why demolition needs to take place:				
	demolition is part of the Calder Land Clearance I for reuse and reduce current lifecycle costs of m	roject Portfolio, once removed this will release a signific aintaining a building which is not in use.	ant		
Please descr	ribe the proposed method of demolition:				
	size reduction of the facility using wheeled exca o concrete base.	vator with selector grab and complete demolition of			
Please provi	de details of the proposed restoration of the site:				
Concrete	base left in place as per end state proposal. All d	ainage connections to be bunged and grouted.			
Please state the expected date of commencement of works (DD/MM/YYYY): 15/09/2022 DATE MUST BE POST SUBMISSION					
Please state the expected date of completion of works (DD/MM/YYYY): 31/08/2023 DATE MUST BE POST SUBMISSION					
Are there any public rights of way within the site or immediately adjoining the site?					
Is redevelopment or rebuilding proposed at a later date? Yes X No *Redevelopment					
Does the proposal involve the felling or pruning of any tree(s)? Yes No options are under review					
If Yes, please show details on a plan and provide the reference number of the plan(s):					
	BE 3032299 Rev D	4.			
2.		5.			
3.		6.			
Please describe how and where spoil/rubble would be disposed:					
Material to be segregated and characterised as per IDS Waste Management Plan, quantities and waste routes stipulates within the supporting document. Demolition will not generate excavation spoil or rubble.					

6. 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 application for	m: The correct fee:					
The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North:						
7. 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:	Or signed - Agent					
n/a						
Date (DD/MM/YYYY):						
15/08/2022 (date cannot be pre-application)						
8. Applicant Contact Details	9. Agent Contact Details					
Telephone numbers n/a	Telephone numbers					
Country code: National number: Extension number:	Country code: National number: Extension number:					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
Country and a Francisco (anti-and)	n/a					
Country code: Fax number (optional):	Country code: Fax number (optional):					
Email address (optional):	n/a Email address (optional):					
Email address (optional).						
10. Site Visit						
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes						
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Applicant Other (if different from the agent/applicant's details)						
If Other has been selected, please provide:						
Contact name: Telephone number:						
A STATE OF THE PARTY OF THE PAR						
Email address:						