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Copeland Borough Council
The Copeland Centre,
Catherine Street, Whitehaven,
Cumbria CA28 7SJ

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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: Euan				
Last name:	Hutton				
Company (optional):	Sellafield Limited				
Unit:	House number: 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 provide the full postal address of the application site. House House			Has assistance or prior advice been sought from the local authority about this application?			
Unit:	House Ho suf		Yes X No			
House name:			If Yes, please complete the following information about the advic 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		Neierence.			
Postcode (optional): CA20 1PG			Date (DD/MM/YYYY):			
Description of location or a grid reference. (must be completed if postcode is not known):			(must be pre-application submission)			
Easting:	Northing:		Details of pre-application advice received?			
Description						
Sellat	ield Site					
_	sed Demolition Works ribe the building(s) to be demolished:					
		o sets of four i	dentical buildings associated with power generation at			
Calder Hall and contain redundant equipment previously used to circulate coolant gas through the reactors.						
Please state why demolition needs to take place:						
_			e redundant, and demolition is required to reduce costs e potential safety issues from degrading plant.			
Please describe the proposed method of demolition:						
Characterisation of waste materials, followed by removal of plant and finally size reduction of the facility using wheeled excavator with attachments ending with complete demolition of the facility to concrete base.						
Please provide details of the proposed restoration of the site:						
	te foundations and plugged drainage ect scheduled to begin shortly.	e connections	will be left in place prior to removal prior to a land			
Please state the expected date of commencement of works (DD/MM/YYYY): 02/08/2024 DATE MUST BE POST SUBMISSION						
Please state the expected date of completion of works (DD/MM/YYYY): 02/08/2029 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)? If Yes, please show details on a plan and provide the reference number of the plan(s): Yes No options are under review						
1.	e show details on a plan and provide the r	eference numbe				
2.			5.			
3.			6.			
	Please describe how and where spoil/rubble would be disposed:					
Material to be segregated and characterised as per project Waste Management Plan, quantities and						
1	utes stipulated within the supporting					

6 Planning Application Paguirements - Chacklist						
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.	valid. To will not be considered valid drivin diffinionilation required by					
The original and 3 copies of a completed and dated application form	n: 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 n/a						
Date (DD/MM/YYYY): 03/06/2024 (date cannot be pre-application)						
8. Applicant Contact Details n/a						
Telephone numbers	Telephone numbers					
Country code: National number: Extension number: Country code: Mobile number (optional):	Country code: National number: Country code: National number: Extensio number:					
Country code: Fax number (optional):	Country code: Fax number (optional): n/a					
Email address (optional):						
10. 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)	X Agent Applicant Other (if different from the agent/applicant's details)					
If Other has been selected, please provide:						
Contact name:	Telephone number:					

Email address: