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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			

Agent Name and Address

THE RESERVE OF THE PARTY OF THE	ddress Details	4. Pre-application Advice		
Please prov	vide the full postal address of the application site.	Has assistance or prior advice been sought from the local		
Unit:	House House number: suffix:	authority about this application? Yes	X No	
House name:		If Yes, please complete the following information about the you were given. (This will help the authority to deal with the		
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	D. frances		
County:	Cumbria	Reference:		
Postcode (optional):	optional): CA20 1PG			
(must be co	n of location or a grid reference. ompleted if postcode is not known):	(must be pre-application submission)		
Easting:	Northing:	Details of pre-application advice received?		
Description				
Sellaf	field Site			
5. Propo	sed Demolition Works			
Please desc	cribe the building(s) to be demolished:			
	- · · · · · · · · · · · · · · · · · · ·	f redundant electricity generation equipment. The bustonry and asbestos-cement sheet clad walls and a flater	_	
	e why demolition needs to take place:	asoni y and aspestos-cement sheet clad wans and a n		
		Project. Once removed this will release a significant la		
	euse and reduce current lifecycle costs of mainta	· · · · · · · · · · · · · · · · · · ·	anu	
Please desc	cribe the proposed method of demolition:			
		te material removal and finally size reduction of the vith complete demolition of building to concrete base	<u>.</u>	
Please prov	vide details of the proposed restoration of the site:			
All concrete foundations and plugged drainage connections will be left in place prior to removal when the land reuse project (when finalised) commences. Any void spaces will be filled with crushed concrete.				
Please state the expected date of commencement of works (DD/MM/YYYY): 01/09/2026 DATE MUST BE POST SUBMISSION				
Please state the expected date of completion of works (DD/MM/YYYY): 31/08/2031 DATE MUST BE POST SUBMISSION				
Are there any public rights of way within the site or immediately adjoining the site?				
Is redevelo	pment or rebuilding proposed at a later date?	Yes X No *Redevelo	•	
Does the proposal involve the felling or pruning of any tree(s)? Yes No options are under				
If Yes, please show details on a plan and provide the reference number of the plan(s):				
1.		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 stipulated within the supporting documentation.				

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 form	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: n/a Date (DD/MM/YYYY): (date cannot be pre-application)					
R Applicant Contact Dotails	Agent Contact Details				
8. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	9. Agent Contact Details Telephone numbers Country code: H44 Country code: Nicolie Humber (optional): n/a 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? Yes X 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: