

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	2. Agent Name and Address
Title: <input type="text" value="Mr."/> First name: <input type="text" value="Martin"/>	Title: <input type="text" value="Mr."/> First name: <input type="text" value="Marc"/>
Last name: <input type="text" value="Chown"/>	Last name: <input type="text" value="Ross"/>
Company (optional): <input type="text" value="Sellafield Limited"/>	Company (optional): <input type="text" value="Sellafield Limited"/>
Unit: <input type="text"/> House number: <input type="text"/> House suffix: <input type="text"/>	Unit: <input type="text"/> House number: <input type="text"/> House suffix: <input type="text"/>
House name: <input type="text"/>	House name: <input type="text"/>
Address 1: <input type="text" value="Hinton House"/>	Address 1: <input type="text" value="Sellafield"/>
Address 2: <input type="text" value="Birchwood Avenue"/>	Address 2: <input type="text"/>
Address 3: <input type="text" value="Birchwood"/>	Address 3: <input type="text"/>
Town: <input type="text" value="Warrington"/>	Town: <input type="text" value="Seascale"/>
County: <input type="text" value="Cheshire"/>	County: <input type="text" value="Cumbria"/>
Country: <input type="text" value="England"/>	Country: <input type="text" value="England"/>
Postcode: <input type="text" value="WA3 6GR"/>	Postcode: <input type="text" value="CA20 1PG"/>

3. Site Address Details

Please provide the full postal address of the application site.

Unit: House number: House suffix:

House name:

Address 1:

Address 2:

Address 3:

Town:

County:

Postcode (optional):

Description of location or a grid reference. (must be completed if postcode is not known):

Easting: Northing:

Description:

4. Pre-application Advice

Has assistance or prior advice been sought from the local authority about this application? Yes No

If Yes, please complete the following information about the advice you were given. (This will help the authority to deal with this application more efficiently).

Please tick if the full contact details are not known, and then complete as much as possible:

Officer name:

Reference:

Date (DD/MM/YYYY):
(must be pre-application submission)

Details of pre-application advice received?

5. Proposed Demolition Works

Please describe the building(s) to be demolished:

The Metals Recycling Facility Office & Changeroom (MRFOC) is made up from two storeys of Portacabins (steel frame and wooden units on concrete pads) and a covered walkway, along with a Glasdon (fibreglass) hut.

Please state why demolition needs to take place:

The MRFOC is a redundant facility which is beyond its usable life and does not meet modern standards and its demolition is required to reduce lifecycle costs of maintaining a building which is not in use.

Please describe the proposed method of demolition:

Characterisation of waste materials, followed by soft strip 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:

All concrete foundations and plugged drainage connections will be left in place prior to removal should any land reuse project be initiated.

Please state the expected date of commencement of works (DD/MM/YYYY): DATE MUST BE POST SUBMISSION

Please state the expected date of completion of works (DD/MM/YYYY): DATE MUST BE POST SUBMISSION

Are there any public rights of way within the site or immediately adjoining the site? Yes No

Is redevelopment or rebuilding proposed at a later date? Yes No *Redevelopment options are under review

Does the proposal involve the felling or pruning of any tree(s)? Yes No

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 project 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):

23/06/2023 (date cannot be pre-application)

8. Applicant Contact Details

Telephone numbers n/a

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):

9. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

10. Site Visit

Can the site be seen from a public road, public footpath, bridleway or other public land? Yes 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: