

This form is specifically designed to be printed and completed offline.

Please complete this form in block capitals using black ink to facilitate scanning.

You are advised to read the accompanying guidance notes and per-question help text.

If you would rather make this application online, you can do so on our website: https://www.planningportal.co.uk/apply

Application to determine if prior approval is required for a proposed: Demolition of Buildings

Town and Country Planning (General Permitted Development) (England) Order 2015 (as amended) - Sch 2, Part 11, Class B

'rivacy Notice

his form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting aformation to a Local Planning Authority in accordance with the legislation detailed on this form.

'lease be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. ony subsequent use of this form is solely at your discretion, including the choice to complete and submit it to a Local Planning Authority in greement with the declaration section.

Ipon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its bligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and ommercial requirements relating to information security and data protection of the information you have provided.

.ocal Planning Authority details:



Proud of our past. Energised for our future.

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

Publication on Local Planning Authority websites

nformation provided on this form and in supporting documents may be published on the authority's planning register and website. 'lease ensure that the information you submit is accurate and correct and does not include personal or sensitive information.

'you require any further clarification, please contact the Local Planning Authority directly.

and the same	
1. Applic	ant Name and Address REMEAR
Title:	MR First name: ROBERT
Last name:	FOTHERINGHAM
Company (optional):	THA FOTHERINGHAM FAIREILD FA
Unit:	FA Aumbert LD FA Abuting
House name:	FAIRFIELD FARM
Address 1:	FAIRFIELD FARM
Address 2:	PICA
Address 3:	WORKINGTON
Town:	CUMBRIA
County:	CAIL 4PZ
Country:	,
Postcode:	

2. Agent	Name and Address
Title:	First name:
Last name:	
Company (
Unit:	House number: House suffix:
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County	
Country:	
Postcode:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

Please provide the full postal address of the application site. Unit: House number: House suffix: House name: FAIRFIELD FARM Address 1: Address 3: PICA DISTINGTON Town: WORKINGTON County: CAMBRIA Postcode (optional): CAILLYPT. Description of location or a grid reference. (must be completed if postcode is not known): Easting: Northing:	4. Pre-application Advice Has assistance or prior advice been sought from the local authority about this application? 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: CHUR UNS WORTH Reference: U/20/2322/0N Date (DD/MM/YYYY): (must be pre-application submission) Details of pre-application advice received?
2772	
5. Proposed Demolition Works Please describe the building(s) to be demolished:	
STONE BUILDING SUFFERING IMPLONATION ON ADVICE OF STUCYRAL ENGIPLES Please state why demolition needs to take place: IMPACT DAMAGE & NEED TO REBUILDING FOR SECUITY & SAFE Please describe the proposed method of demolition: QUALFIED PEOPLE / CONTRI	EPHACE WITH MODERN AGRICUTUR
Please provide details of the proposed restoration of the site:	
MODERN AGICULTURAL BUILL	TING
Please state the expected date of commencement of works (DD/MM/Please state the expected date of completion of works (DD/MM/YYY). Are there any public rights of way within the site or immediately adjusted to redevelopment or rebuilding proposed at a later date?	oining the site? DATE MUST BE POST SUBMISSION MORE TAIN Yes No TO RNY STANDA
Does the proposal involve the felling or pruning of any tree(s)?	Yes No STRUCURE LEFT
If Yes, please show details on a plan and provide the reference numb	A s M s s s s s s s s s s s s s s s s s
1. APLICATION PLANS ALRIS 2. PLEASE REFER	5. SUBMITTED 5.
Please describe how and where spoil/rubble would be disposed:	0.
	PMIT/LICENCE FOR INFAT WASTE

6. Planning Application Requirements - Checklist Please read the following checklist to make sure you have sent all the nft ation required will result in your application being deemed investigation being Authority (LPA) 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 application relates drawn to an identified scale and showing the direct	the tion of North:		
A statement that a site notice has been posted in accordance with B.2 (b) (iv) of Part 11 of Schedule 2 to the General Permitted Developmen	t Order 2015:		
n cases where the building is not a community asset and is used for a purpose falling within Class A4 (drinking establishments) of the Scheo to the Use Classes Order, a written request to the local planning authors to whether the building has been nominated:	lule		
*National legislation specifies that the applicant must provide the original of four copies), unless the application is submitted electronically PAs may also accept supporting documents in electronic format by prou can check your LPA's website for information or contact their plan	or, the LPA indicate oost (for example, on	that a smaller number of copies is req a CD, DVD or USB memory stick).	
7. Declaration •	*		
/we hereby apply for planning permission/consent as described in the nformation. I/we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them.	is form and the acco facts stated are true	mpanying plans/drawings and addition and accurate and any opinions given	onal are the
Signed - Applicant:	Or signed - Agent:		
*		as / A	
	4.4		1.
Date (DD/MM/YYYY):			
(date cannot be pre-application)	i i		
	9. Agent Conta	act Details	
B. Applicant Contact Details	9. Agent Conta		
	9. Agent Conta		Extension
B. Applicant Contact Details Telephone numbers	Telephone numbe		Extension number:
B. Applicant Contact Details Telephone numbers Extension	Telephone numbe	rs lational number:	
B. Applicant Contact Details Telephone numbers Country code: National number: Extension number:	Telephone numbe	rs	
B. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional):	Telephone number Country code: Country code:	lational number:	
B. Applicant Contact Details Telephone numbers Country code: National number: Extension number:	Telephone number Country code: Country code:	rs lational number:	
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B. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 10. Site Visit Can the site be seen from a public road, public footpath, bridleway or f the planning authority needs to make an appointment to carry put a site visit, whom should they contact? (Please select only one) f Other has been selected, please provide:	Telephone number Country code: Country code: Country code: Email address (optension) other public land? Agent	Applicant Alational number: Alational number: Alational number: Applicant Applicant Applicant Applicant Applicant Applicant Applicant Applicant	number:
B. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): To. Site Visit Can the site be seen from a public road, public footpath, bridleway or f the planning authority needs to make an appointment to carry put a site visit, whom should they contact? (Please select only one) f Other has been selected, please provide: Contact name:	Telephone number Country code: Country code: Country code: Email address (opten public land?	Applicant Alational number: Alational number: Alational number: Applicant Applicant Applicant Applicant Applicant Applicant Applicant Applicant	number:
B. Applicant Contact Details Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): 10. Site Visit Can the site be seen from a public road, public footpath, bridleway or f the planning authority needs to make an appointment to carry put a site visit, whom should they contact? (Please select only one) f Other has been selected, please provide:	Telephone number Country code: Country code: Country code: Email address (optension) other public land? Agent	Applicant Alational number: Alational number: Alational number: Applicant Applicant Applicant Applicant Applicant Applicant Applicant Applicant	number:

