PLANNING PORTAL

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

·ivacy Notice

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

ease 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. y subsequent use of this form is solely at your discretion, including the choice to complete and submit it to a Local Planning Authority in reement with the declaration section.

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

ocal Planning Authority details:

South Tyneside Council

Planning Group
South Tyneside Council, Town Hall & Civic Offices,
Westoe Road, South Shields, Tyne and Wear, NE33 2RL
Email: planningapplications@southtyneside.gov.uk
Tel: 0191 424 7421

ublication on Local Planning Authority websites

ormation provided on this form and in supporting documents may be published on the authority's planning register and website. ease ensure that the information you submit is accurate and correct and does not include personal or sensitive information. ou require any further clarification, please contact the Local Planning Authority directly.

. Applicant Name and Address

itle:	
First name:	
ast name:	
ompany ptional):	
nit:	
House number:	
House suffix:	
ouse ame:	
ddress 1:	
ddress 2:	
ddress 3:	
own:	
ounty:	
ountry:	
ostcode:	

2. Agent Name and Address

Title:	MRS
First name:	FAYE
Last name:	TULLY
Company (optional):	SOUTH TYNESIDE HOMES
Unit:	4
House number:	
House suffix:	
House name:	MIDDLEFIELDS DEPOT
Address 1:	UNIT 4
Address 2:	HEDDON WAY
Address 3:	
Town:	SOUTH SHIELDS
County:	TYNE & WEAR
Country:	ENGLAND
Postcode:	NE34 0NT

Site Address Details

Please provide the full postal address of the application site.

Unit:	
House number:	1-13
House suffix:	
House name:	
Address 1:	TEMPLE PARK ROAD
Address 2:	
Address 3:	
Town:	SOUTH SHIELDS
County:	TYNE & WEAR
Postcode (optional):	NE33 2AH

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

Easting: Northing:

Description:

BLOCK OF 13 GARAGES

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?

Proposed Demolition Works

Please describe the building(s) to be demolished:

BRICK, TIMBER, METAL & CONCRETE CONSTRUCTION

Please state why demolition needs to take place:

BEYOND REPAIR & HEALTH & SAFETY ISSUE

Please describe the proposed method of demolition:

PROGRESSIVE NIBLING USING A 360 DEGREE EXCAVATOR

Please provide details of the proposed restoration of the site:

REMOVAL OF FLOOR SLAB FONDATION RECOVERIN MATCHING SURFACE MATERIAL MAKE GOOD EXISTING FENCING

Please state the expected date of commencement of works (DD/MM/YYYY): 20/03/22 DATE MUST BE POST SUBMISSION

Please state the expected date of completion of works (DD/MM/YYYY): 20/06/22 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

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:

. Planning Application Requirements - Checklist

ease read the following checklist to make sure you have sent all the information in support of your proposal. Failure to submit all formation required will result in your application being deemed invalid. It will not be considered valid until all information required by e Local Planning Authority (LPA) has been submitted.

ıe original and 3 copies* of a completed and dated application form: ☑ The correct fee: ☐

ıe original and 3 copies* of a plan which identifies the land to which the ɔplication relates drawn to an identified scale and showing the direction of North: ☑

statement that a site notice has been posted in accordance with B.2) (iv) of Part 11 of Schedule 2 to the General Permitted Development Order 2015: ☑

cases where the building is not a community asset and is used for a ırpose falling within Class A4 (drinking establishments) of the Schedule the Use Classes Order, a written request to the local planning authority ; to whether the building has been nominated: ☑

lational legislation specifies that the applicant must provide the original plus three copies of the form and supporting documents (a tal of four copies), unless the application is submitted electronically or, the LPA indicate that a smaller number of copies is required. PAs may also accept supporting documents in electronic format by post (for example, on a CD, DVD or USB memory stick). ɔu can check your LPA's website for information or contact their planning department to discuss these options.

. Declaration

ve hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional formation. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the enuine opinions of the person(s) giving them.

ɨigned - Applicant: [redacted]

ɔate (DD/MM/YYYY): 21/12/2021 (date cannot be pre-application)

. Applicant Contact Details

elephone numbers

ɔountry code:	National number:	Extension number:

ɔountry code: Mobile number (optional):

ɔountry code: Fax number (optional):

mail address (optional):

9. Agent Contact Details

Telephone numbers

Country code:	[redacted]	Extension number:

Country code: Fax number (optional):

Email address (optional):

0. Site Visit

an the site be seen from a public road, public footpath, bridleway or other public land? ☑ Yes ☐ No

the planning authority needs to make an appointment to carry ıt a site visit, whom should they contact? *(Please select only one)* ☑ Agent ☐ Applicant ☐ Other (if different from the agent/applicant's details)

Other has been selected, please provide:

ɔontact name: FAYE TULLY Telephone number:

mail address: [redacted]

