BARNSLEY
Metropolitan Borough Council

Planning and Building Control
Economic Regeneration - Place Directorate
Barnsley Metropolitan Borough Council, PO Box 634, Barnsley, S70 9GG
DevelopmentManagement@barnsley.gov.uk
www.barnsley.gov.uk/services/planning-and-buildings

Application for prior notification of proposed demolition.

Town and Country Planning (General Permitted Development) Order 2015 Schedule 2, Part 11

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:		First name:			
Last name:					
Company (optional):					
Unit:		House number:		House suffix:	
House name:					
Address 1:					
Address 2:					
Address 3:					
Town:					
County:					
Country:					
Postcode:					

2. Agent Name and Address

Title:	MR	First name:	DANIEL		
Last name:	GOULDING ·				
Company (optional):	NPS BARNSLEY ·				
Unit:		House number:		House suffix:	
House name:	GATEWAY PLAZA ·				
Address 1:	SACKVILLE STREET				
Address 2:					
Address 3:					
Town:	BARNSLEY ·				
County:	SOUTH YORKSHIRE ·				
Country:					
Postcode:	S70 2RD ·				

3. Site Address Details

Please provide the full postal address of the application site.

Unit:		House number:		House suffix:	
House name:	KINGPINS NURSERY (FORMER KINGSTONE SCHOOL)				
Address 1:	BROADWAY.				
Address 2:					
Address 3:					
Town:	BARNSLEY				
County:					
Postcode (optional):	S70 6RB.				

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

Easting: | Northing:

Description:

KINGPINS NURSERY ON FORMER KINGSTONE SCHOOL SITE. MOSTLY NOW RESIDENTIAL DEVELOPMENT BUT SITS WITHIN ITS OWN CURTILAGE.

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: JAMES HYDE.

Reference:

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

Details of pre-application advice received?

ONLY A PHONE CALL TO CONFIRM THIS APPLICATION IS ALL THAT IS REQUIRED BY PLANNING. AND EMAILS IN RELATION TO THE CHECKLIST.

5. Proposed Demolition Works

Please describe the building(s) to be demolished:

TIMBER SECTIONAL BUILDING FORMALLY USED AS NURSERY FACILITIES.

Please state why demolition needs to take place:

PROPERTY HAS SUFFERED NUMEROUS ATTEMPTS OF VANDALISM & ARSON.

Please describe the proposed method of demolition:

CAREFULLY TAKE DOWN SECTIONS, BREAKING UP ENOUGH TO PLACE IN SKIPS AND REMOVE FROM SITE. RAMS CAN BE PROVIDED AT A LATER DATE IF REQUIRED.

Please provide details of the proposed restoration of the site:

ALL CONSTRUCTION DEBRIS TO BE REMOVED FROM SITE. TIMBER HOARDING TO REMAIN.

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

Please state the expected date of completion of works (DD/MM/YYYY): TBA. 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:

N/A.

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 (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 the application relates drawn to an identified scale and showing the direction 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 Development Order 2015: ☐

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

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

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 signed - Agent: [redacted]

Date (DD/MM/YYYY): 12/09/17. (date cannot be pre-application)

8. Applicant Contact Details

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: [redacted] | Extension number: [redacted]

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 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: DANIEL GOULDING.

Telephone number: [redacted]

Email address: