



# Demolition Notice Application

This form is to be filled in by the person who intends to carry out demolition work or their agent.. For further information please speak Building Control. For help in completing this form, phone Building Control on 01253 476219. Please type or use black ink

## 1 Person who intends to carry out demolition (Contractor):

Name:

Address:

(include postcode)

Tel:

Email:

Mandatory field -  
Used for all  
communication

## 2 Property Owner / Land Owner:

Name:

Address:

(include postcode)

Tel:

Email:

Mandatory field -  
Used for all  
communication

## 3 Site Location: (Please provide site location plan showing building to be demolished with minimum size of 1:1250)

Address:

(include postcode)

## 4 Description of buildings to be demolished:

Description:

## 5 Demolition commencement date:

Date:

## 6 Demolition completion date:

Date:

## 7 A copy of the Demolition Notice will be sent to the various Utility Companies along with the Health and Safety Executive. Occupiers of adjacent properties shall also be informed of the proposed demolition.

## 8 Declaration:

I hereby deposit a Section 80 Notice in accordance with the requirements of the Building Act 1984

Signed:

Date:

On behalf of: