**DEMOLITION APPLICATION FORM**

Section 80 of the Building Act 1984

This form is to be filled out by the person who intends to carry out the demolition or the applicant.

**Please type or use block capitals**

<table>
<thead>
<tr>
<th>Your details (person applying)</th>
<th>Name and address of Demolition Contractor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Title:</td>
<td>Title:</td>
</tr>
<tr>
<td>First Name:</td>
<td>First Name:</td>
</tr>
<tr>
<td>Surname:</td>
<td>Surname:</td>
</tr>
<tr>
<td>Address:</td>
<td>Address:</td>
</tr>
<tr>
<td>Postcode:</td>
<td>Postcode:</td>
</tr>
<tr>
<td>Daytime telephone number:</td>
<td>Daytime telephone number:</td>
</tr>
<tr>
<td>Email:</td>
<td>Email:</td>
</tr>
</tbody>
</table>

**Postal address of the application site**

Address:

Postcode:

Daytime telephone number:

Email address:

**Demolition work to be carried out**

Description:

Date demolition will start:
You must carry out the following consultations

Please confirm a copy of this form has been to the following?

- South West Water  
- Wales & West Utilities (Gas)  
- Western Power (Electricity)  
- Adjoining property owners *

*Please provide addresses or properties contacted

Location Plan

Please provide a location plan showing the proposal in relation to the existing buildings and site boundaries
**Statement**

I undertake to carry out the works in accordance with the specified details and to notify all adjoining owners and Statutory Undertakers of the demolition. I understand that I may not commence demolition work until I have received notice of the Council’s requirement(s) under Section 81, or a period of not more than six weeks has expired from the date I give this notice.

Name:  
Signature:  
Date:  

Please send your completed application to Building Control, Plymouth City Council, Ballard House, West Hoe Road, Plymouth PL1 3BJ.

**Data Protection Act**

The information you provide will be used to process this application and the details supplied are regarded as public information.