Building Control,

District Council Offices, St Peter's Street, St Albans, Hertfordshire, AL1 3JE Telephone: 01727 819289 Email:



DEMOLITION NOTICE

The Building Act 1984
The Building Regulations 2010
Section 80 to 83

buildingcontrol@stalbans.gov.uk

This form is to be filled in by the person who intends to carry out the building works or their agent. If the form is unfamiliar please contact the Building Control department. Please type or use block capitals. It should be returned to the address above.

1.	Details of person intending to undertake the demolition Name:			
	Address:			
	Postcode:	Tel:	Email:	
2.	Name:	on whose behalf demolition	is to be carried ou	
	Address:			
	Postcode:	Tel:	Email:	
3.	Location of building Address: Postcode:	ng to be demolished		
	*Please provide a location plan showing clearly: (a) The building to be demolished and relevant site boundaries (b) Any ancillary buildings adjacent to the building to be demolished			
	(c) The location of drains and sewers to be sealed, disconnected or removed			
4.	Intended date of d Date:	emolition commencement		
5.		of demolition works the site works will exceed 28 d	lays please state the	intended additional duration (in days):
	Standard charge (n replacement buildir	ot applicable if Building Contr ng) £110.00	ol FP application sub	mitted to SADC for
6.	A copy of this notice is also being sent, or given, by me to: (a) The occupier of any building adjacent to the building to be demolished (b) The public gas supplier (c) The public electricity supplier			
7. S		ant to Section 80 of the Buildin begin the demolition of the b		intend, at the expiry of six weeks after ve.
	Name:	Signature	ə:	Date:

