Planning Services, Adur & Worthing Councils

Portland House,
44 Richmond Road,
Worthing,
West Sussex,
BN11 1HS

Tel : 01903 221065
websites : www.adur.gov.uk or www.worthing.gov.uk
e-mail : planning@adur-worthing.gov.uk

QKGT. 28/2/18 V2

Application for approval of details reserved by condition.
Town and Country Planning Act 1990
Planning (Listed Buildings and Conservation Areas) Act 1990

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.

1. Applicant Name, Address and Contact Details

Title:	Mr	First Name:	Graeme	Surname:	McClure
Company name:	Environment Agency				
Street address:	Guildbourne House				
	Chatsworth Road			Telephone number:	
				Mobile number:	
Town/City:	Worthing			Fax number:	
Country:				Email address:	
Postcode:	BN11 1LD				

Are you an agent acting on behalf of the applicant? (•) Yes ( ) No

2. Agent Name, Address and Contact Details

Title:	Ms	First Name:	Helen	Surname:	Ashworth
Company name:	Mott MacDonald				
Street address:	Endeavour House				
	Pynes Hill			Telephone number:	01392409408
				Mobile number:	
Town/City:	Exeter			Fax number:	
Country:	United Kingdom			Email address:	
Postcode:	EX2 5WH				helen.ashworth@mottmac.com

3. Site Address Details

Full postal address of the site (including full postcode where available)

House: Suffix:

House name:

Street address:

Town/City:

Postcode:

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

Easting: 521322

Northing: 105042

Description:

Foreshore North of Adur Outdoor Activities Centre and East and West of River Adur, Brighton Road, Shoreham-by-Sea, West Sussex

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):

Officer name:

Title: Mr First name: Gary Surname: Peck

Reference:

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

Details of the pre-application advice received:

5. Description of the Proposal

Please provide a description of the approved development as shown on the decision letter:

IMPROVEMENTS TO 1.8KM OF TIDAL DEFENCES ON THE EAST BANK BETWEEN CORONATION GREEN AND THE A27 ROAD BRIDGE AND 5.4KM OF DEFENCES ON THE WEST BANK BETWEEN SHOREHAM OLD FORT AND SHOREHAM TOLL BRIDGE. PROPOSED DEVELOPMENT (REFERRED TO AS THE SHOREHAM ADUR TIDAL WALLS SCHEME) CONSISTS OF SEVEN REACHES ON THE WEST BANK (DESIGNATED W1 - W7 INCLUSIVE) AND THREE REACHES ON THE EAST BANK (DESIGNATED E1 - E3 INCLUSIVE). THE PROPOSED DEFENCES INCLUDE STEEL SHEET PILING, CONCRETE WALLS, FLOOD GLASS AND EARTH EMBANKMENTS. ADDITIONAL WORKS TO INCLUDE A SECTION OF ROAD RAISING, SCOUR PROTECTION IN THE FORM OF ROCK REVETMENT, MATTING, PLANTED TERRACES AND GABIONS AND THE CREATION OF 1.3 HA OF INTERTIDAL SALT MARSH IN REACH W7 AND LANDSCAPE IMPROVEMENTS AT TOWN QUAY AND THE SHOREHAM OLD FORT CAR PARK. THE APPLICATION IS ACCOMPANIED BY AN ENVIRONMENTAL IMPACT ASSESSMENT.

Application reference number: AWDM/1614/15 Date of decision: 01/06/2016

Please state the condition number(s) to which this application relates:
Condition number(s):

Conditions 9 and 14 (Reaches W1 and W7)

Has the development already started? (•) Yes ( ) No If Yes, please state when the development was started: 01/09/2016

Has the development been completed? ( ) Yes (•) No

6. Discharge of Condition(s)

Please provide a full description and/or list of the materials/details that are being submitted for approval:

Bridge Inn Flood Wall Proposal (Drawing ref: 5000_MC_009)

6. Discharge of Condition(s)

E1 Bridge Inn Glass (photo)
E1 Bridge Inn Handrail and glass balustrade (photo)
Bridge Inn confirmation email for Condition 9
Dust and Silt Management Plan Reach W1 (REV1 11.01.18)
Dust and Silt Management Plan Reach W7 (REV1 08.02.18)
Please refer to further details included within Covering Letter.

7. Part Discharge of Condition(s)

Are you seeking to discharge only part of a condition? (•) Yes ( ) No

If Yes, please indicate which part of the condition your application relates to:

Condition 14 - Partial discharge for Reaches W7 and W1.

8. 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)

( ) The agent ( ) The applicant (•) Other person

If Other has been selected, please provide:

Title: Mr First name: Terry Surname: Gretton

Telephone number: [redacted]

Email Address: [redacted]

9. 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. ☑ Date 22/02/2018