20/10



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Telephone Fax

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For office usa Date

Payee App. No. Fæe

Application for tree works: works to trees subject to a tree preservation order (TPO) and/or notification of proposed works to trees in a conservation area.

## **Town and Country Planning Act 1990**

## Publication of planning applications on planning authority websites

Please note that with the exception of applicant contact details, the information provided on this application form and in supporting documents may be published on the authority's website.

If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the authority's website, please contact the authority's planning department.

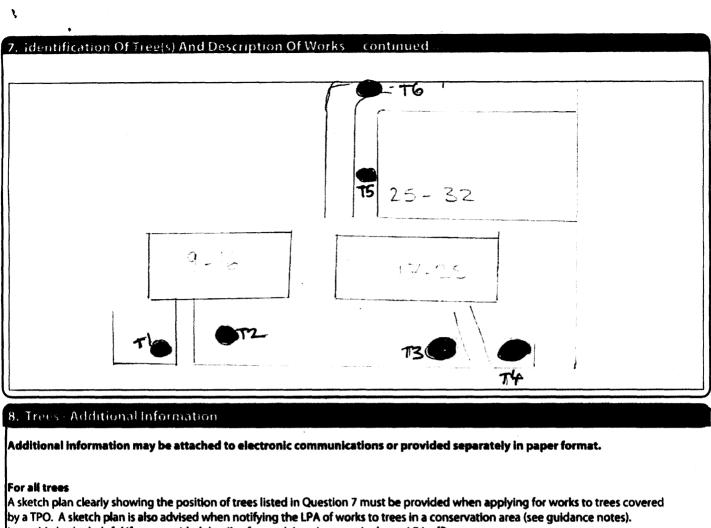
Please complete using block capitals and black ink.

You must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in a conservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

1. Applicant Name and Address	2. Agent Name and Address
Title: First name:	Title: First name:
Last name:	Last name:
Company (optional): FARADAY PROPERTY MANAGEMENT	Company (optional): TREE(ARE
Unit: House number: 52-54 House suffix:	Unit: House number: House suffix:
House NIGH MULBORN MOUSE	House name:
Address 1: THIRD FLOOR WEST	Address 1: ROSEBANK WORKS
Address 2: HIGH HULBORN	Address 2: ROSEBANK WAY
Address 3:	Address 3:
Town:	Town:
County:	County:
Country:	Country:
Postcode: VC1V GRL	Postcode: U3 6T7

3. Trees Location	4. Trees Ownership
If all trees stand at the address shown in Question 1, go to Question 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)	Is the applicant the owner of the tree(s):  If 'No' please provide the address of the owner (if known and if different from the trees location)
Unit: House 5 House suffix:	Title: First name:
House name: BRUCKFIELD MANSIONS	Company (optional):
Address 1: MIGNGATE	Unit: House House suffix:
Address 2: WEST HILL	House name:
Address 3:	Address 1:
Town:	Address 2:
County:	Address 3:
Postcode (If known): N 6	Town:
If the location is unclear or there is not a full postal address, either describe as clearly as possible where it is (for example, 'Land to the	County:
rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or	Country:
provide an Ordnance Survey grid reference:  Description:	Postcode:
Occupation.	Telephone numbers Extension
	Country code: National number: number:
	Country code: Mobile number (optional):
	Country code. Mobile Humber (optional).
]]	Country code: Fax number (optional):
11	3206 0077
	Email address (optional):
5. What Are You Applying For?	6. Tree Preservation Order Details
Are you seeking consent for works to tree(s)	If you know which TPO protects the tree(s), enter its title or number below.
subject to a IPO?	
Are you wishing to carry out works to tree(s) res No	
7. Identification Of Tree(s) And Description Of Works	
Please identify the tree(s) and provide a full and clear specification of	f the works you want to carry out. Continue on a separate sheet if
necessary. You might find it useful to contact an arborist (tree surger protected by a TPO, please number them as shown in the First Scheo	on) for help with defining appropriate work. Where trees are fulle to the TPO where this is available. Use the same numbers on
your sketch plan (see guidance notes).	
trees are protected by a TPO you must also provide reasons for the w	ne number used on the sketch plan) and description of works. Where york and, where trees are being felled, please give your proposals for
planting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value.	d size) or reasons for not wanting to replant. Replant with 1 standard ash in the same place.
See Attached	Map



TIO 1872			
. Trees - Additional Information			
dditional information may be attached to electronic communications or provided separatel	y in paper fo	ormat.	
or all trees  sketch plan clearly showing the position of trees listed in Question 7 must be provided when app y a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation a would also be helpful if you provided details of any advice given on site by an LPA officer.			
or works to trees covered by a TPO lease indicate whether the reasons for carrying out the proposed works include any of the followin oust be accompanied by the necessary evidence to support your proposals. (See guidance notes for			
<ol> <li>Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall:         If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.     </li> </ol>	┌ Yes	□ No	
<ol> <li>Alleged damage to property - e.g. subsidence or damage to drains or drives.</li> <li>If YES, you are required to provide for:</li> </ol>	┌ Yes	T/No	
Subsidence  A report by an engineer or surveyor, to include a description of damage, vegetation and repair proposals. Also a report from an arboriculturist to support the tree works.		g data, soil, roots	
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of da	amage and p	ossible solutions.	
Documents and plans (for any trae) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	┌─ Yes	ſ <sup>™</sup> No	
If YES, please provide the reference numbers of plans, documents, professional reports, photograph of they are being provided separately from this form, please detail how they are being submitted.	phs etc in sup	pport of your applicati	ion.

9. Application For Tree Works - Checklist				
Only one copy of the application form and additional information (Q make sure that this form has been completed correctly and that all resupply precise and detailed information may result in your application but it may help you to submit a valid form.	uestion 8) is required. Please use the guidance and this checklist to elevant information is submitted. Please note that failure to on being rejected or delayed. You do not need to fill out this section,			
Sketch Plan				
<ul> <li>A sketch plan showing the location of all trees (see Question</li> </ul>	18)			
For all trees (see Question 7)				
Clear identification of the trees concerned	ل ا			
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>				
For works to trees protected by a TPO (see Question 8)				
Have you:	_			
<ul><li>stated reasons for the proposed works?</li></ul>				
<ul> <li>provided evidence in support of the stated reasons? In particular:</li> <li>if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert</li> </ul>				
<ul> <li>if you are alleging subsidence damage - a report by an</li> </ul>	appropriate engineer or surveyor			
and one from an arboriculturist.  • in respect of other structural damage - written technic	al evidence			
<ul> <li>included all other information listed in Question 8?</li> </ul>				
10. Declaration - Trees  [/we berely apply for consent/give notice for tree work as described]	In this form and the accompanying plans and additional information.			
Signed - Applicant:	Of signed - Agent:			
	T. T. Water			
Date (DD/MMA0000)	arun py norgy			
Date (DD/MM/YYYY):  20/10/2009 (This date must not be before the date of sending or hand-delivery of the form)				
11. Applicant Contact Details	12. Agent Contact Details			
Telephone numbers	Telephone numbers			
Extension	Extension			
Country code: National number: number:	Country code: National number: number:			
Country code: Mobile number (optional):	Country code: Mobile number (optional):			
Country Code. Mobile number (optional):	Country code: Mobile Inditiber (optional):			
Country code: Fax number (optional):	Country code: Fax number (optional):			
3206 0077	Tax Hallinet (optional).			
Email address (optional):	Email address (optional):			
(4)	office Otree Care. Co. U.R			
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Electronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in the same manner.

(Please see guidance notes)