2009/4881/T



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For office use Date Pavee App. No.

Fee

# 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).

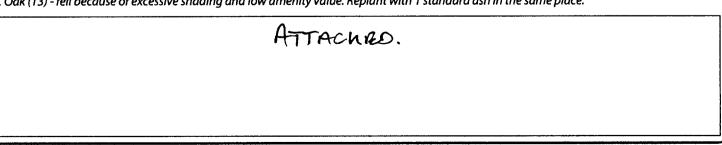
It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

1. Applicant Name and Address	2. Agent Name and Address	
Title: First name:	Title: MR First name: PAUL	
Last name: LAPPING	Last name: MACQURRN	
Company (optional):	Company (optional): MODERN ARSSERVICENS	
Unit: House number: 6 House suffix:	Unit: House House suffix:	
House name: GARDEN FLAT	House name: WOODGIRLD WRSERARS	
Address 1: EATON AVE	Address 1: Cash oran Lange.	
Address 2:	Address 2:	
Address 3:	Address 3:	
Town:	Town:	
County:	County:	
Country:	Country:	
Postcode: NN3	Postcode: Nwg 7NSB.	

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): Yes No If 'No' please provide the address of the owner (if known and if different from the trees location)
Unit: House number: House suffix:   House name: House AVE.   Address 1:   Address 2:   Address 3:   Town:   County:   Postcode (if known):   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 rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or	Title: First name:   Last name: Company (optional):   Unit: House number:   House name: House suffix:   Address 1: Address 2:   Address 3: Town:   County: Country:
provide an Ordnance Survey grid reference: Description:	Postcode:
Construct MRSLADDING Goe Accors UZOT 5829910.	Telephone numbers       Extension         Country code:       National number:         Country code:       Mobile number (optional):         Country code:       Fax number (optional):         Country code:       Fax number (optional):         Email address (optional):       Email address (optional):
<ul> <li>5. What Are You Applying For?</li> <li>Are you seeking consent for works to tree(s) Yes No subject to a TPO?</li> <li>Are you wishing to carry out works to tree(s) Yes No in a conservation area?</li> </ul>	6. Tree Preservation Order Details If you know which TPO protects the tree(s), enter its title or number below.
7. Identification Of Tree(s) And Description Of Works	

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on your sketch plan (see guidance notes).

Please provide the following information below : tree species (and the number used on the sketch plan) and description of works. Where trees are protected by a TPO you must also provide reasons for the work and, where trees are being felled, please give your proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant. E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.



## 8. Trees - Additional Information

#### Additional information may be attached to electronic communications or provided separately in paper format.

### For all trees

A sketch plan clearly showing the position of trees listed in Question 7 must be provided when applying for works to trees covered
by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation area (see guidance notes).
It would also be helpful if you provided details of any advice given on site by an LPA officer.

#### For works to trees covered by a TPO

Please indicate whether the reasons for carrying out the proposed works include any of the following. If so, your application must be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)

1	. <b>Condition of the tree(s)</b> - 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.	☐ Yes	∏ No	
2				

 Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES, you are required to provide for:

Su	bs	ide	nce	
зu	OS.	ıae	nce	

A report by an engineer or surveyor, to include a description of damage, vegetation, monitoring data, soil, roots and repair proposals. Also a report from an arboriculturist to support the tree work proposals.

Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of damage and possible solutions.

#### Documents and plans (for any tree)

☐ Yes ☐ No

☐ No

Yes

If YES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application
If they are being provided separately from this form, please detail how they are being submitted.

## 9. Application For Tree Works - Checklist

Only one copy of the application form and additional information (Question 8) is required. Please use the guidance ar make sure that this form has been completed correctly and that all relevant information is submitted. Please note the supply precise and detailed information may result in your application being rejected or delayed. You do not need t but it may help you to submit a valid form.

#### **Sketch Plan**

#### For all trees

(see

(see Question 7)	
<ul> <li>Clear identification of the trees concerned</li> </ul>	
<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> </ul>	
<ul> <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 appropriate engineer or surveyor and one from an arboriculturist.</li> </ul>	
<ul> <li>in respect of other structural damage - written technical evidence</li> </ul>	
<ul> <li>included all other information listed in Question 8?</li> </ul>	

# 10. Declaration - Trees

I/we hereby apply for consent/give notice for tree work as describ	ed in this form and the accompanying plans and additional information.	
Signed - Applicant:	Or signed - Agent:	
Date (DD/MM/YYYY):		
(This date must not be before the date of sending or hand-delivery of the for		
11. Applicant Contact Details	12. Agent Contact Details	

Telephone numbers		Telephone numbers	
Country code: National number:	Extension number:	Country code: National number: Extension number:	
		07725 952675	
Country code: Mobile number (optional):		Country code: Mobile number (optional):	
Country code: Fax number (optional):		Country code: Fax number (optional):	
Empil address (aptional):		Email address (optional):	
Email address (optional):		Info Cmodenat. Co. Uh.	

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)

7. Ident