



| . Trees Loc   | ation            |               | 4. Trees Owner  | ship                      |             |                           |
|---|------------------|---------------|---|---------------------------|-------------|---------------------------|
| 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 |                           |             |                           |
| Jnit:   | House<br>number: | House suffix: | owner (if know and Title:   | if different from the tre | esiocation) | ele ris (d.<br>ele rev II |
| louse<br>lame:  |                  |               | Last name:  | 11101101101               |             |                           |
| address 1:  |                  |               | Company (ontional):   |                           |             |                           |
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| is section only needs to be completed if yo  |  | r a Tree Preservation Order (TPO)  |  |
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| ease state the reasons for carrying out the  | proposed works on the tree(s):   | Salar Salar (Salar Salar |  |
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| Hartogey Council   |  |  |  |
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| vidential gov.uk/apply   | dly via their aroung corea by <del>redu</del>  | con complete and submit this form electronics  |  |
| ( CO)  | NGTON ROAM   |  |  |
| currents may be published on the<br>apierning department   | ication form and in supporting do-<br>from places contacting Authority   | ote that the information provided on this approvements if you require any lufther donling  |  |
| ease indicate whether the reasons for carry  | ring out the proposed works include  | any of the following. If so, your application must   | be   |
| companied by the documents specified.  |  | ent orthound on ana applying for workto tree   |  |
| ealth or safety of the tree(s) - e.g. it is diseas<br>Yes, information required - report by a tree   |  | sementing prime arricons and beet live territ togits   |  |
| dviser).   |  |  |  |
| legad a haidenes demogo.   |  | ☐ Yes ☐ No   |  |
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| 10. Application For Tree Works - Checklist  |   |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|
| Please use this checklist to ensure that the form has been completed of   | correctly and that all relevant information is submitted.   |  |  |  |  |  |  |
| For works to trees protected by a Tree Preservation Order, failure to su application being rejected or delay in dealing with it. In particular, you                                 |   |  |  |  |  |  |  |
| 3 copies of a completed and dated application form.   |   |  |  |  |  |  |  |
| 3 copies of a sketch plan showing the location of all tree(s).  | Unit Summer Summer Summer   |  |  |  |  |  |  |
| 3 copies of a full and clear specification of the works to be carried out.  |   |  |  |  |  |  |  |
| 3 copies of a statement of reasons for the proposed work.   | - Arrange (Arrange)   |  |  |  |  |  |  |
| safety of the tree(s).  | d provide:<br>or horticultural adviser) if your reasons relate to the health and/or<br>one from a tree professional (arboriculturist) if you are alleging |  |  |  |  |  |  |
| For works to trees in conservation areas, it is important to supply preci<br>wish to provide the following:<br>3 copies of a completed and dated form, with all questions answered. | se and detailed information on your proposal. You may, therefore,   |  |  |  |  |  |  |
| 3 copies of a sketch plan showing the precise location of all tree(s).  | Tit known) L  |  |  |  |  |  |  |
| 3 copies of a full and clear specification of the works to be carried out.  | If the issuitable is acquired as not acquired acquired activities and inclination and it  |  |  |  |  |  |  |
| Whether the trees are protected by a TPO or in a conservation area, ple following types of additional information you are submitting (3 copies                                      |   |  |  |  |  |  |  |
| - photographs.   - photographs.   |   |  |  |  |  |  |  |
| - report by a tree professional (arboriculturist) or other.   |   |  |  |  |  |  |  |
| - details of any assistance or advice sought from a Local Planning Author   | ority officer prior to submitting this form.  |  |  |  |  |  |  |
| Sgned - Applicant:  Date (DD/MM/YYYY):  (date cannot be pre-application)  |   |  |  |  |  |  |  |
| 12. Applicant Contact Details   | 13. Agent Contact Details   |  |  |  |  |  |  |
| Telephone numbers   | Telephone numbers   |  |  |  |  |  |  |
| Country code: National number: Extension number:  | Country code: National number: Extension number:  |  |  |  |  |  |  |
| Country code: Mobile number (optional):   | Country code: Mobile number (optional):   |  |  |  |  |  |  |
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| Email address (optional):   | Email address (optional):   |  |  |  |  |  |  |
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