



For office use only Application No Date received Fee paid £ Receipt No:

Church Walk, Chtheroe, Lancashire, B87 2R/

www.ribblevalley.gov.uk

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**

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

## 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.

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. Applic	2. Agent	
Title:	MR First name: HARRY	Title:
Last name:	PROOS	Last name:
Company (optional):		Company (optional):
Unit:	House number: 7 House suffix:	Unit:
House name:		House name:
Address 1:	EIM CLOSE	Address 1:
Address 2:	Calders Tones PARK	Address 2:
Address 3:	Whalley	Address 3:
Town:	LANCS	Town:
County:		County:
Country:		Country:
Postcode:	BB7 9UT	Postcode:

2. Agent Name and Address			
Title:	mrz First name: Andrew		
Last name:	ISHERWOOD		
Company (optional):			
Unit:	House number: 9 House suffix:		
House name:			
Address 1:	Queensway		
Address 2:	waddingtin		
Address 3;	LANCS		
Town:			
County:			
Country:			
Postcode:	BB7 3HL		

320170631

Garage

7. Identification Of Tree(s) And Description Of Works continued		
also there are two multi-stemed ash here attention very tall and Rot showing at base the house. I think selective Felling of some TI e T2 multi-stemed ash selective felling seletive prinning away from Garage	and 1	eaning to
8. Trues - Additional information  Additional information may be attached to electronic communications or provided separation of trues.  For all trues  A sketch plan clearly showing the position of trees ilsted in Question 7 must be provided when a by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation it would also be helpful if you provided details of any advice given on site by an LPA officer.  For works to trues covered by a TPO  Please indicate whether the reasons for carrying out the proposed works include any of the folion must be accompanied by the necessary evidence to support your proposals. (See evidence to support your proposals.)	pplying for v n area (see g	vorks to trees covered uidence notes).
must be accompanied by the necessary evidence to support your proposals. (See guidence note  1. 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.	for further	intalls)
2. Alloged demage to property - e.g. substitience or damage to drains or drives.  If YES, you are required to provide for:  Substitience  A report by an engineer or suppose as include a damage.	[ Yes	∫ No
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 world other structural damage (e.g. drains, walls and hard surfaces). Written technical evidence from an appropriate expert, including description of data.	k proposals.	
ocuments and plans (for any tree) re you providing separate information (e.g. an additional schedule of work for Question 7)?	/ Yes	[ <sup>™</sup> No
YES, please provide the reference numbers of plans, documents, professional reports, photograph they are being provided separately from this form, please detail how they are being submitted.	rs etc in supp	port of your application

9. Authority Employee / Momber	
With respect to the Authority, I am:	
(a) a member of staff (b) an elected member (d) related to a member of staff (d) related to an elected member	Do any of these statements apply to you?
(b) an elected member (d) related to an elected member	Yes No
If Yes, please provide details of the name, relationship and role	- Annual
	erralitation de la company de
To the state of th	
10. Application For Tree Works - Checklist	
Only one copy of the application form and additional information (Ques	action 01 is considered files and the same of the same
to design that the folial has been completed correctly and that all release	Want information is submissed Disease was about the
supply precise and detailed information may result in your application b	being rejected or delayed. You do not need to fill out this section
but it may help you to submit a valid form	
Sketch Plan	·
A sketch plan showing the location of all trees (see Question 8)	
For all trees	
(see Question 7)	
Clear identification of the trees concerned	
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>	
Englander & Array Control of the State of th	
For works to trees protected by a TPO (see Question 7)	
Have you:	
stated reasons for the proposed works?	П
<ul> <li>provided evidence in support of the stated reasons? in particular</li> </ul>	transm
<ul> <li>If your reasons relate to the condition of the tree(s) - written</li> </ul>	en evidence from an
appropriate expert	Ę.I
<ul> <li>If you are alleging subsidence damage - a report by an apprand one from an arboriculturist</li> </ul>	propriate engineer or surveyor
in respect of other structural damage - written technical evi	uidance -
	- Indiana
<ul> <li>included all other information listed in Question 8?</li> </ul>	
11. Declaration - Trees	
/we hereby apply for consent/give notice for tree work as described in this	old form and the accompanying place and additional information
Signed - Applicant: Ors	signed - Agent:
	or showed
Date (DD/MM/YYYY):	
7/7/2:17 (This date must not be before the date	-
7/7/2017 (This date must not be before the date of sending or hand-delivery of the form)	
2. Applicant Contact Details 13.	3. Agent Contact Details
	elephone numbers
Country code: National number: Extension number: Country code: National number: National number: National number: National number: National number: Nationa	ountry code: National number number
	120 424817
country code: Mobile number (optional): Cou	ountry code: Mobile number (optional):
	67779589713
ountry code: Fax number (optional): Cou	ountry code: Fax number (optional):
mail address (optional):	mail address (optional):

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