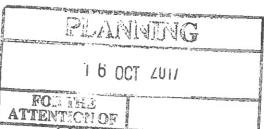
320170977



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.

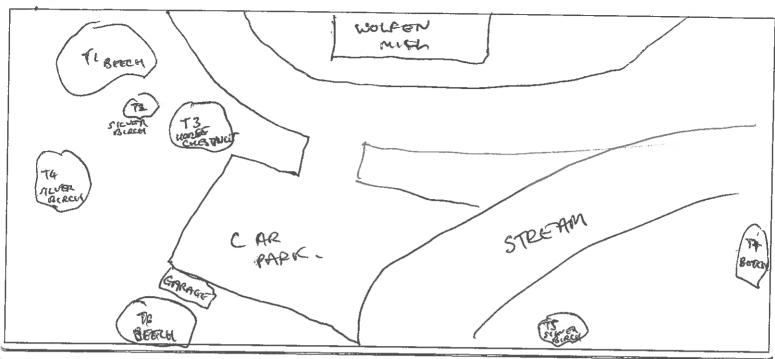
You must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give notice of works to trees in a conservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application /

1. Applicant Name and Address	2. Agent Name and Address	
Title: First name:	Title: Mr First name: MIKE	
Last name:	Last name: GSHER	
Company (optional): WOLFEN MILL COTTAGES.	Company (optional): FISHER FORESTRY	
Unit: House number: House suffix:	Unit: House House suffix:	
House name: Wolfen MILL	House name: blocking face	
Address 1: FISH HOUSE CANE	Address 1: Stary BURN REND	
Address 2: CHIPPING	Address 2: WADDINGTON	
Address 3:	Address 3:	
Town:	Town: CLAMEROE	
County: LANCASHIRE	County: CANCASHIFE	
Country:	Country:	
Postcode: PR3 ZGR	Postcode: BB7 3TQ	

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 House suffix:	Title: First name:
House name:	Last name: Company
Address 1:	(optional): House House
Address 2:	House name:
Address 3:	Address 1:
Town:	Address 2:
County:	Address 3:
Postcode (if known):	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 provide an Ordnance Survey grid reference:	Country:
Description:	Postcode:
	Telephone numbers Extension Country code: National number: number:
]	Hational Hamber.
	Country code: Mobile number (optional):
	Country code: Fax number (optional):
	Email address (optional):
	Zirian address (optional).
5. What Are You Applying For?	6. Tree Preservation Order Details
	If you know which TPO protects the tree(s), enter its title or number
Are you seeking consent for works to tree(s) Yes No subject to a TPO?	below.
·	CHIPPING NO 1 1970 (WI)
Are you wishing to carry out works to tree(s) Yes No	
7. Identification Of Tree(s) And Description Of Works	
Please identify the tree(s) and provide a full and clear specification of necessary. You might find it useful to contact an arborist (tree surged protected by a TPO, please number them as shown in the First Sched your sketch plan (see guidance notes). Please provide the following information below: tree species (and the trees are protected by a TPO you must also provide reasons for the wellowing replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value.	on) for help with defining appropriate work. Where trees are lule to the TPO where this is available. Use the same numbers on the number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for size) or reasons for not wanting to replant.
RECH-(TI) BLOWN OVER + ROMONE.	BRECH (17) - BLOWN OVER - RAYOUE.
SILVER BLACH (72) LEANING - REMOVE HICKET CHECKET LAN PART - IN	DECLINE - REMOVE
HOSSE CHESTINGT (T3) - SHED BRANCHES IN PAST - IN SILVER BIRCH (T4) - HUNG UP IN ANOTHER TREE - JUNER BIRCH (T5) - ONE PORK FAILED - RET PRESE	. REMOVE.
STECH (TS) - ONE RORK FAILED - RET PRESE	INT - REMOVE

7. Identification Of Tree(s) And Description Of Works continued ...



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.	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:	Yes	∏ No

Subsidence

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) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	Yes	No

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.

	Member am: related to a member of staff related to an elected member	Do any of these statements apply to you?
If Yes, please provide details of	the name, relationship and role	
10. Application For Tree \	Mayles Observing	
Only one copy of the application make sure that this form has bee	n form and additional information on completed correctly and that al rmation may result in your applica	(Question 8) is required. Please use the guidance and this chec Il relevant information is submitted. Please note that failure to ation being rejected or delayed. You do not need to fill out this
Sketch Plan		
A sketch plan showing to	the location of all trees (see Questi	ion 8)
For all trees (see Question 7) • Clear identification of the	ng trags concerned	
	ition of the works to be carried out	ıt —
For works to trees protected by (see Question 7)		·
Have you:		
 stated reasons for the property 	roposed works?	П
 provided evidence in su 	pport of the stated reasons? in par	rticular:
 if your reasons rela appropriate exp 	te to the condition of the tree(s) - 1 pert	written evidence from an
if you are alleging s		an appropriate engineer or surveyor
	n arbonculturist. structural damage - written techni	ical evidence
 included all other inform 	nation listed in Question 8?	
11. Declaration - Trees /we hereby apply for planning pe information. I/we confirm that, to genuine opinions of the person(s) Signed - Applicant:	me best of my/but knowledge an	this form and the accompanying plans/drawings and additiona by facts stated are true and accurate and any opinions given are Or signed - Agent:
		mg/L.
Date (DD/MM/YYYY): 8 10 17 (This dof sen	ate must not be before the date ding or hand-delivery of the form))
2. Applicant Contact Deta	ils	13. Agent Contact Details
Telephone numbers	~. ·	Telephone numbers
Country code: National number	Extension number:	Country code: National number: Extension
Country code: Mobile number (optional):	O(200 427472 Country code: Mobile number (optional):
	, and the state of	07773 072825
Country code: Fax number (opti	onal):	Country code: Fax number (optional):
mail address (optional):		Email address (optional):
		Fishergor & icloud. com
lectronic communication - If you s Please see guidance notes)	ubmit this form by fax or e-mail th	he LPA may communicate with you in the same manner.