

For office use only Application No. 3/2022/0333.

Date received

Fee paid £

Receipt No:

Council Offices, Church Walk, Clitheroe, Lancashire. BB7 2RA

1- 01200 425444

ww.ribblevallev.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).

t 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 Na	me and Address	
Title:	MRS First name: JURSTY .	Title:	First name:	
Last name:	GRAYSON.	Last name:		
Company (optional):		Company (optional):		
Unit:	House number: &A House suffix:	Unit:	House number:	House suffix:
House name:	MIGH BEECH HOUSE	House name:		
Address 1:	CA CROTICUS BROW	Address 1:		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	CHATBURN	Town:		
County:	LANCS	County:		
Country:	U.K.	Country:		
Postcode:	6874AA .	Postcode:		

3. Trees Loc	ation		1	4. Trees O	wnership			
4. Otherwise, please provide the full address/location of the site				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 number:	House suffix:		Title:	First nar	me:		
House name:	Ildinbel,	Sullix.		Last name: Company		-		
Address 1:	Annual Control of the			(optional):	House		House	
Address 2:				House	number:		suffix:	-
Address 3:				name: L		B. G.	-	
Town:				Address 2:				
County:	×			Address 3:				
Postcode (if known):		Mary Superings	Rear Townson	Town:				
If the location is	unclear or there is not a			County:				
rear of 12 to 18	rly as possible where it is High Street' or 'Woodlan	d adjoining Elm R		Country:				
provide an Ord Description:	nance Survey grid refere	nce:		Postcode:		- di	· or ways and distribution	
bescription.				Telephone n	umbers			Extension
				Country cod	e: National number	er		number:
				Country cod	e: Mobile number	(optional):		
				Country cod	e: Fax number (op	tional):		
				Email addres	s (optional)			
				Linuidadica	o tobuorum.		Philipping and the same	
E Milat Ana	Van Application For		\equiv	(Tree Dr	oom ration Ondo	- Doželle		
o. What Are	You Applying For?			1	eservation Orde which TPO protects th		ar its titla	or pumber
Are you seeking	g consent for works to to	ee(s) les	No	below.	•		1 Its due	or riginizer
subject to a TP	0?			7/19	13/227	`		
Are you wishing in a conservation	g to carry out works to tr on area?	ree(s) Yes	No					
7. Identifica	tion Of Tree(s) And	Description O	of Works					
necessary. You protected by a	the tree(s) and provide a might find it useful to co TPO, please number the	ontact an arborist ((tree surgeo	n) for help with	defining appropriat	te work. Where	e trees are	е
	n (see guidance notes). the following informatio	n below : tree spe	cies (and th	e number used	on the sketch plan)	and descriptio	n of worl	ks. Where
	cted by a TPO you must a ement trees (Including o						your pro	posals for
E.g. Oak (T3) - fe	ell because of excessive sha	ading and low ame	enity value. I	Replant with 1 st	tandard ash in the sar	me place.		
Rome	CH TREE STELLTURAN OF THE S	_	Tユ	-D	WE TO S	19.01710	TUPE	
Deed	en coule	_ DEFE	CTS I	LE TO	THE ADI	ANCED	EFF	ECTS
	DE TILE S	OFT POT	T DEC	sty CA	using Fun	1645		=0000000
,								
	OF THE	STEM AT	GO	ND LEVE	1 Rea	ulent	<u>I</u>	10.

7. Identification Of Tree(s) And Description Of Works continued			
REMOVE LAS BEEN RECOMMENDED BY ARBORIST LISTED ON RUBC WEBSTIE	1 Pni	_ HARRIS,	
ALBORIST LISTED ON KUBC WEBSITE			
SYCAMORE TREE - TZ - TREE TOO LARGE FOR CARDEN A MANAGEMENT - CROWN RED-C CROWN LIFTEN COUNT THUNING	TOV	GETTING EDS - 6-81	'n
O Torre Addition at C			_
8. Trees - Additional Information Additional information may be attached to electronic communications or provided separat For all trees A sketch plan clearly showing the position of trees listed in Question 7 must be provided when ap by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation	oplying for we	orks to trees covered	
It would also be helpful if you provided details of any advice given on site by an LPA officer.	i area (see gu	idance notes).	
For works to trees covered by a TPO Please indicate whether the reasons for carrying out the proposed works include any of the follow must be accompanied by the necessary evidence to support your proposals. (See guidance notes	ving. If so, yo s for further d	ur application etails)	
 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.) Yes	☐ No	
 Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES, you are required to provide for: 	☐ Yes	I 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 wor	n, monitoring k proposals.	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 po	ossible solutions.	
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	Yes	Γ No	
f YES, please provide the reference numbers of plans, documents, professional reports, photograp f they are being provided separately from this form, please detail how they are being submitted.	ohs etc in sup	port of your application	on.
ATTACHED TO EMAIL: -		7	
ATTACHED TO ENAIL : HE. THIS FORM. HE. 3 PROKES'S HE. EMAIL. FROM PAIL LARLIS.			
SE EMAIL FROM PAIL HALLIS.			

9. Authority Employee / Member					
With respect to the Authority, I am: (a) a member of staff (c) related to a member of s	taff	Do	any of these sta	itements apply to y	ou?
(a) a member of staff (c) related to a member of s (b) an elected member (d) related to an elected me	mber		Yes	No	
If Yes, please provide details of the name, relationship an	d role				
if Yes, please provide details of the harro, relative,					l l
10. Application For Tree Works - Checklist				the mildenes and	this chacklist to
Only one copy of the application form and additional informake sure that this form has been completed correctly a supply precise and detailed information may result in yo but it may help you to submit a valid form.	ormation (Que nd that all rele ur application	estion 8) is req evant informat being rejecte	uired. Please us tion is submitte d or delayed. Yo	d. Please note that to dudo not need to fi	failure to Il out this section,
Sketch Plan					
 A sketch plan showing the location of all trees (see Question 8	8)			
For all trees (see Question 7)				3	
 Clear identification of the trees concerned 				1	
 A full and clear specification of the works to be 	carried out				
For works to trees protected by a TPO (see Question 7)					
Have you:					
stated reasons for the proposed works?					
 provided evidence in support of the stated rea if your reasons relate to the condition of tappropriate expert if you are alleging subsidence damage - a and one from an arboriculturist. in respect of other structural damage - with included all other information listed in Question 	ne tree(s) - wh report by an a ritten technica	appropriate e		eyor D	
11. Declaration - Trees I/we hereby apply for planning permission/consent as of infinity of the planning permission of the plann	described in the swiedge, any the date of the form)	is form and th facts stated at Or signed - A	e ti de di la acco	g plans/drawings a trate and any opinio	nd additional ons given are the
	=	G0.0	O-minal Da	talla	
12			t Contact De	talis	
Te	Extension	Telephone	numbers		Extension
Ca	number:	Country co	de: National	number:	number:
Co		Country co	de: Mobile n	umber (optional):	
				11177	
Co		Country co	de: Fax numi	per (optional):	
Email address (optional):		Email addr	ess (optional):		