

For office use only
Application No. 3/2023/0335

Date received 26/4/23

Fee paid £TREE Receipt No:

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

Tel: 01200 425111

www.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).

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	ant Name and Address	2. Agent Name and Address		
Title:	MRS First name: ROSIE	Title: MR First name: RYAN		
Last name:	QUINN	Last name: GCEDHILL		
Company (optional):		Company (optional): BOWLAND TREE		
Unit:	House House suffix	Unit: House I l House suffix		
House name:	LONGSIGHT HOUSE	House name: CANNON STREET		
Address 1:	LONGSIGHT ROAD	Address 1: PRESTON		
Address 2:		Address 2:		
Address 3:		Address 3:		
Town:	LANGITO	Town:		
County:	LANCASHIRE	County: LANCASHIRE		
Country:		Country:		
Postcode:	BB6 8AD	Postcode: BR PR 13 NR.		

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 suffic:	Title: First name:			
House name: N/A	Last name: Company			
Address 1:	(optional): House House			
Address 2:	House number: sumx			
Address 3:	name: 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 Country code: National number:  Country code: Mobile number (optional):  Country code: Fax number (optional):  Email address (optional):			
5. What Are You Applying For?	6. Tree Preservation Order Details			
Are you seeking consent for works to tree(s) Yes No	If you know which TPO protects the tree(s), enter its title or number below.			
subject to a TPO?	LANGHO COLONY TREE			
Are you wishing to carry out works to tree(s) Yes No	PRESERVATION 1988			
necessary. You might find it useful to contact an arborist (tree surg protected by a TPO, please number them as shown in the First Sch your sketch plan (see guidance notes).  Please provide the following information below: tree species (and trees are protected by a TPO you must also provide reasons for the planting replacement trees (including quantity, species, position a E.g. Oak (T3) - fell because of excessive shading and low amenity value.	of the works you want to carry out. Continue on a separate sheet if eon) for help with defining appropriate work. Where trees are edule 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 nd size) or reasons for not wanting to replant.  e. Replant with 1 standard ash in the same place.  TREE SVENCY WITH DETAILS			

7. Identification Of Tree(s) And Description Of Works continued				
Banking a model with the second s				
8. Trees - Additional Information				
Additional information may be attached to electronic communications or provided separa	lak in manasi			
as a remained to alconomic communications of broyless sebara	tery in paper t	ormat.		
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.	u area faca Ant	uance notes).		
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)				
		remaj		
<ol> <li>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     </li> </ol>	Yes	□ No		
diagnostic information from an appropriate expert.				
2. Alleged damage to property - e.g. subsidence or damage to drains or drives.	☐ Yes	T-M6		
If YES, you are required to provide for:	, 100	1040		
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 wo	ork proposals.			
Other structural damage (e.g. drains, walls and hard surfaces)				
Written technical evidence from an appropriate expert, including description of	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	No		
If YES, please provide the reference numbers of plans, documents, professional reports, photographics	aphs etc in sun	port of your application		
If they are being provided separately from this form, please detail how they are being submitted		post or your approaction.		

1 Date: 2012-07-17 #1 ( Revision: 4636 )

3. Authority Employee / Member With respect to the Authority, I am:	
a) a member of staff (c) related to a member of staff Do any of these statements	apply to you?
b) an elected member (d) related to an elected member Yes	No
f Yes, please provide details of the name, relationship and role	4
0. Application For Tree Works - Checklist	
Only one copy of the application form and additional information (Question 8) is required. Please use the gui make sure that this form has been completed correctly and that all relevant information is submitted. Please supply precise and detailed information may result in your application being rejected or delayed. You do not but it may help you to submit a valid form.	note that failure to
Sketch Plan	
<ul> <li>A sketch plan showing the location of all trees (see Question 8)</li> </ul>	
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>	
For works to trees protected by a TPO (see Question 7)	
Have you:	
<ul> <li>stated reasons for the proposed works?</li> </ul>	9
<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</li> </ul>	<b>2</b>
appropriate expert  if you are alleging subsidence damage - a report by an appropriate engineer or surveyor	-
and one from an arboriculturist.	
<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>	
11. Declaration - Trees	
I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/d	rawings and additional
Information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and genuine opinions of the person(s) giving them.	any opinions given are the
Signed - Applicant: Or signed - Agent:	
Date .	
Date (porming 111).  (This date must not be before the date	
2 5 4 23 (This date must not be before the date of sending or hand-delivery of the form)	
12. Applicant Contact Details 13. Agent Contact Details	
Extension	Extension
Country code: National number: number: Country code: National number:	number:
Country and	-AB
Country code: Mobile number (o	ptional):
Country and a	
Country code: Fax number (option	nai):
Email address (optional):	

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)