

32024042

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

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

Tel: 01200 425111 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. Applicant Name and Address	2. Agent Name and Address
Title: RS First name: RS	Title: First name: LAURA
Last name: KELLY	Last name: ROSTRON
Company (optional):	Company (optional): SHIREBURNE PARK
Unit: House number: House suffix:	Unit: House number: House suffix:
House name:	House name:
Address 1: KING FISHER CLOSE	Address 1: EDISFORD ROAD
Address 2: SHIREBURNE PARK	Address 2: WADDINGTON
Address 3: EDISFORD ROAD	Address 3:
Town: CLITHERCE	Town: CHITHEROE
County:	County:
Country:	Country:
Postcode: BB 3LB	Postcode: BBD 3LB

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 number: House suffix:	Title: MRS First name: LANKA
House name:	Last name: Posteriu
Address 1: KING-FISHER CLOSE	(optional): SHIKEBURN PARK
Address 2: EDISTORO ROAD	Unit: House number: House suffix
Address 3: WADDING TON	name:
Town: CLITHEREE	Address 1: EDISTORD ROAD
County:	Address 2: WADDINGTON
Postcode (if known): BB: 348	Address 3:
If the location is unclear or there is not a full postal address, either	Town: CLITHERGE
describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or provide an Ordnance Survey grid reference:	Country:
Description:	Postcode: RRO R R
'T'IS a Willow Thee	Telephone numbers Extension
that woning Crawing	Country code: National number: number:
that replies Crawing t thining out due	Country code: Mobile number (optional):
	Country code: Fax number (optional)
to overgrowth.	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.
Are you wishing to carry out works to tree(s)	SHIREBURE PARK.
in a conservation area? Yes No	
in a conservation area? Yes No	
7. Identification Of Tree(s) And Description Of Works Please identify the tree(s) and provide a full and clear specification of t necessary. You might find it useful to contact an arborist (tree surgeon protected by a TPO, please number them as shown in the First Schedu 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 worplanting replacement trees (including quantity, species, position and s E.g. Oak (T3) - fell because of excessive shading and low amenity value. Ref.	number used on the sketch plan) and description of works. Where the are humbers on the sketch plan and description of works. Where k and, where trees are being felled, please give your proposals for

Bashell Brook.  - willow Thee  Wildow Thee
Trees - Additional Information
dditional information may be attached to electronic communications or provided separately in paper format.
or all trees sketch plan clearly showing the position of trees listed in Question 7 must be provided when applying for works to trees covered a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation area (see guidance notes). would also be helpful if you provided details of any advice given on site by an LPA officer.  or works to trees covered by a TPO ease indicate whether the reasons for carrying out the proposed works include any of the following. If so, your application sust be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)
<ol> <li>Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall: γes No If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.</li> </ol>
2. Alleged damage to property - e.g. subsidence or damage to drains or drives.  If YES, you are required to provide for:
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.
ocuments and plans (for any tree) e you providing separate information (e.g. an additional schedule of work for Question 7)?  Yes  No
/ES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application. hey are being provided separately from this form, please detail how they are being submitted.

9. Authority Employee / Iviemper		
With respect to the Authority, I am:		
(a) a member of staff (c) related to a member of staff (b) an elected member (d) related to an elected member	Do any of these statements apply to you?	
	Yes No	
If Yes, please provide details of the name, relationship and role		
10. Application For Tree Works - Checklist		
Only one copy of the application form and additional information ( make sure that this form has been completed correctly and that all supply precise and detailed information may result in your applicat	Ouestion 8) is required. Please use the guidance and this checklist to relevant information is submitted. Please note that failure to ion 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	,	
<ul> <li>A sketch plan showing the location of all trees (see Questic</li> </ul>	on 8)	
For all trees		
(see Question 7)	rd	
<ul> <li>Clear identification of the trees concerned</li> <li>A full and clear specification of the works to be carried out</li> </ul>		
The works to be conted out		
For works to trees protected by a TPO (see Question 7)		
Have you:		
<ul><li>stated reasons for the proposed works?</li></ul>		
provided evidence in support of the stated reasons? in particular:		
<ul> <li>if your reasons relate to the condition of the tree(s) - v</li> </ul>		
appropriate expert  if you are alleging subsidence damage - a report by a	n appropriate engineer or survoyor	
and one from an arboriculturist.		
<ul> <li>in respect of other structural damage - written technic</li> </ul>	cal evidence	
<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 t information. I/we confirm that, to the best of my/our knowledge, an	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the	
genuine opinions of the person(s) giving them.  Signed - Applicant:	•	
зіўней - Арріісапі.	Or signed - Agent:	
Date (DD/MM/YYYY):		
(This date must not be before the date of sending or hand-delivery of the form)		
12. Applicant Contact Details	13. Agent Contact Details	
Telephone numbers Extension	Telephone numbers	
Country code: National number: number:	Country code: National number: Extension number:	
Country code: Mobile number (optional):	Country code: Mobile number (optional):	
Country code: Fax number (optional):	Country code: Fax number (optional):	
Email address (optional):	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)