

23 MAR 2021

Planning and Regeneratio

	Email: planning@cornwall.gov.uk	Telephone: 0300 1234 151	Websiter www.comwall.gov.uk
West .	- Planning & Regeneration (omwali Councii, Dolcoath Avenue,	Gamborné, TR14/8SX
Central	Planning & Regeneration. (Jornwall Council, Carrick House, Pyc	ar Street, Truro, TR1 1EB
East	Planning & Regeneration (Cornwall Council, Chy Trevall, Bodini	n, Cornwell, PL31 2FR
Household	er Team Planning & Regeneration, (Cornwall Council, Dolcoath Avenue,	Camborne, TR14/85X

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			
Title:	ME First name: DAVID		
Last name:	HUMPHRIS		
Company (optional):			
Unit:	House number: House suffix:		
House name:			
Address1:	GROVEHILL CRESCENT		
Address2:			
Address3:			
Town:	FALMOUTH		
County:	CORNWALL		
Country:	U.K.		
Postcode:	TRII 3HP		

2. Agent	Name and Address
Title:	First name:
Last name:	
Company (optional):	
Unit:	House number. House suffix:
House name:	
Address1:	
Address2:	
Address3:	
Town:	
County:	
Country:	
Postcode:	

3. Irees L	ocation	4. Irees	Ownership	_
Question 4.0	and at the address shown in Question 1, go to Otherwise, please provide the full address/location of ere the tree(s) stand (including full postcode	'No please	cant the owner of the tree(s): I provide the address of the sown and if different from the	(A) 1.02 (A) 1.13
11	House O	Title:	First name:	
Unit: House	number: suffix:	Last name:		
name;		Company (optional):		
Address1:	GROVETHU CRESCENT	Unit:	House number;	House suffix:
Address2:		House name:	CORNWAN G	moul
Address3:		Address1:	(FOK'S LAMBELA	<u> </u>
Town:	tarmorth	Address2:		
County:	CORNWALL	Address3:		
Postcode (if known):	TRII 3HP	Town:	FACMOUTH	
	n is unclear or there is not a full postal address, either	County:	CUENMAN	
rear of 12 to 1	learly as possible where it is (for example, 'Land to the 18 High Street' or 'Woodland adjoining Elm Road') or	Country:	U·K.	
provide an O Description:	rdnanceSurvey grid reference:	Postcode:	TRII 3HP	
	dution to (1) and (3) above	Telephone	numbers	Extension
l	s a Yew Tree in the	Country co	de: National number:	number:
1	public hotpath orea (Fox's		de: Mobile number (option	
Lone) at the per of NO. 7's				
garden. The large conifer		Country code: Fax number (optional):		
is in the S.E. corner of thair		Fmailaddn	ess(optional):	
lower	v garden.		oogopaonary.	
		Please ent trees (this	Preservation Order Deta er the title or number of the " information is found on the in council website – search und	TPO which protects the nteractive map on the
Are you wish in a conserv	ning to carry out works to tree(s) Ves Downward No			
	necked the Interactive Map on Council website? (search	ll as vo	t up to date	2. Shows
under trees)		tree	on Car Por	ABEA applias.
7. Identific	cation Of Tree(s) And Description Of Works			
	ify the tree(s) and provide a full and clear specification o . You might find it useful to contact an arborist (tree sur			
protected by	ya TPO, please number them as shown in the First Scho			
-	tch plan (see guidance notes). de the following information below : tree species (and th	e number used	ion the sketch plan) and des	cription of works.Where
trees are pro	tected by a TPO you must also provide reasons for the	work and, wher	e trees are being felled, please	
	lacement trees (including quantity, species, position and)-fell because of excessive shading and low amenity val			place.
	5 5 A. A. B. B. A. L. 3		<u> </u>	
1	E Sei Altarhed A4 shee	C ₁		

7. Identification Of Tree(s) And Description Of Works continued		
		
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8. Trees-Additional Information		
Additional information may be attached to electronic communications or provided separa	tely in paperf	ormat.
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 of the last 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 follow must be accompanied by the necessary evidence to support your proposals. (See guidance note		
 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	[☑\No
Subsidence A report by an engineer or surveyor, to include a description of damage, vegetatio and repair proposals. Also a report from an arboriculturist to support the tree work		lata, 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 pos	siblesolutions.
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, photograph if they are being provided separately from this form, please detail how they are being submitted.	phs etc in suppo	ort of your application.
TREE SURVEY BY OBJECTIVE TREE CA SUBMITTED WITH PAZO/01081 ON PI	NJUC KN	21
SUBMITTED WITH PAZO 101081 ON PI	MANAMA	PORTAL

9. Authority Employ				
With respect to the Autho (a) a member of staff	nty, ram: (c) related to a member of staff	Doar	ny of these statements	apply to you?
(b) an elected member	(d) related to an elected member	Y	'es	No
If Yes, please provide deta	ails of the name, relationship and role			
10. Application For T	ree Works-Checklist			
make sure that this form	lication form and additional information has been completed correctly and that al d information may result in your applicat omit a valid form.	relevant information	is submitted. Please r	note that failure to
Sketch Plan				
 A sketch planish 	owing the location of all trees (see Quest	ion 8)		'∑'
For all trees (see Question 7)	an at the transfer of			od.
	on of the trees concerned			▼
	pecification of the works to be carried out			lacksquare
For works to trees protect (see Question 7)	ted by a TPO			
Have you:				
 stated reasons fo 	r the proposed works?			\mathbf{Y}'
 if your reasonappropria 	•	ritten evidence from		
	leging subsidence damage - a report by a rom an arboriculturist.	ın appropnate engine	erorsurveyor	
in respect of	other structural damage - written techn	ical evidence		
 included all other 	r information listed in Question 8?			
	<u> </u>			
information, I/we confirm genuine opinions of the pe	ning permission/consent as described in that, to the best of my/our knowledge, an	this form and the acc yfacts stated are true	companying plans/dra e and accurate and an	awings and additional y opinions given are the
Signed - 1		Or signed - Ager	ıt:	
			,	
Date (DD/MM/YYY):	1			
18.03,21	(This date must not be before the date of sending or hand-delivery of the form)		
12. Applicant Contac	ct Details	13. Agent Co	ntact Details	
Telephone numbers		Telephone num	bers	
Country code: National	number: Extension number:	Country code:	National number:	Extension number:
44		7[[
· · · ·	umber (optional):	Country code:	Mobile number (opt	ional):
	ļ			
Country code: Fax num	ber (optional):	Country code:	Faxnumber (options	al):
			<u> </u>	
Email address(optional):		Email address(&	optional):	
		IJ <u>Ĺ</u>		
Electronic communication	- If you submit this form by fax or e-mail t	he LPA may commun	icate with you in the s	ame manner.

(Pleasesee auidance notes)