



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

Privacy Notice

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information security and data protection data and data protection data and data protection data and data and

Local Planning Authority details:

Officer JUN 2021 SCAMBED CO OR PO NO PRE GEN DOS

Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applica	ant Name and Address	2. Agent Name and Address	
Title:	MR First name:	Title: Mr. First name:	
Last name:	O'ROURKE	Last name: LAURENCE	
Company (optional):		Company (optional): JOHN BARBER PRINTING	
Unit:	House 17 House suffix:	Unit: House number: 76 House suffix:	
House name:		House name: THE GARRETT	
Address 1:	WEST STREET	Address 1: SMITH STREET	
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:	WARWICK	Town: WARWICK	
County:	WARWICKSHIRE	County: WARWICKSMIRE	
Country:	EN6LAND	Country: GNGLAND	
Postcode:	CU34 6AH	Postcode: CU34 4HU	

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:	Company (optional):				
Address 1:	Unit: House House suffix:				
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:				
Description.	Telephone numbers Extension Country code: National number: number:				
	Country code: National number: number:				
	Country code: Mobile number (optional):				
	Country code: Fax number (optional):				
	Email address (optional):				
	6. Tree Preservation Order Details				
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.				
Are you wishing to carry out works to tree(s)	N/A				
in a conservation area?					
Communication of Work	re				
7. Identification Of Tree(s) And Description Of Works Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if					
Please identify the tree(s) and provide a full and clear specification of the works yet works appropriate work. Where trees are necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on					
your sketch plan (see guidance notes). Please provide the following information below: tree species (and the number used on the sketch plan) and description of works. Where					
1. It is a Too you must also provide reasons for the work align where these are being relied, producing for provide reasons for the work align.					
planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant. E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.					
T1 - PEDLAR FELL TO GROWD LEVEL					
I TO GOOD LEVEL					
TOOK ADE BECOMING TOO BIG FOR THEIR DETINA					
AND ALSO ARE VERY CLE	BE TO A WALL AND BOOK				
LIANG THE MIGHWAY					

7. Identification Of Tree(s) And Description Of Works continued					
Huse T2		RANCE TO MCK CASTUS L PARK TRATFORD			
WEST STREET	<u></u>				
8. Trees - Additional Information					
Additional information may be attached to electronic communications or provided separate	ly in paper fo	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.					
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	ing. If so, you for further de	ır application stails)			
Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fail: If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.	☐ Yes	∃ ₩			
 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 	☐ Yes	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 da	таде апо ро	221016. 2010 (10) 12°			
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	[_] Yes	□ ₩			
If YES, please provide the reference numbers of plans, documents, professional reports, photogra If they are being provided separately from this form, please detail how they are being submitted.	phs etc in sur	oport of your application.			
Q. Authority Employee / Member					
9. Authority Employee / Member It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.					
(a) a men (b) an ele (c) relate (d) relate	pect to the au orber of staff acted member d to a member d to an electe	er of staff			
if Yes, please provide details of their name, role and how you are related to them.					
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10. Application For Tree Works - Checklist						
Only one copy of the application form and additional information (Question 8) is required. Please use the guidance and this checklist to make sure that this form has been completed correctly and that all relevant information is submitted. Please note that failure to supply precise and detailed information may result in your application 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						
 A sketch plan showing the location of all trees (see Questio 	n 8)					
For all trees (see Question 7) Clear identification of the trees concerned						
 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 reasons? in part if your reasons relate to the condition of the tree(s) - w appropriate expert 						
 appropriate expert if you are alleging subsidence damage - a report by ar 	appropriate engineer or surveyor					
and one from an arboriculturist. in respect of other structural damage - written technic	ral evidence					
·						
 included all other information listed in Question 8? 						
11. Declaration - Trees I/we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY):						
26/5/21 (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	Telephone numbers					
Country code: National number: Extension number:	Country code: National number: Extension number:					
Country code: Mobile number (optional):	Country code: Mobile number (optional):					
	07854981592					
Country code: Fax number (optional):	Country code: Fax number (optional):					
Email address (optional):	Email address (optional):					
Character (character)	Paul Lawrence 893@ GMAIL. COM					

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)