

Planning Services

Council Offices, Weeley, Essex, CO16 9AJ Email: planning.services@tendringdc.gov.uk

Website: www.tendringdc.gov.uk Telephone: 01255 686161

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:	MISS First name: DANJELLE	Title: MR First name: GEORGE				
Last name:	WESTON	Last name: SANDERSON				
Company (optional):		Company (optional): GS TREES AND LANDSCAPES				
Unit:	House 79 House suffix:	Unit: House suffix:				
House name:		House ELM FARM				
Address 1:	BIRCH AVENUE	Address 1: SNAM ROAD				
Address 2:	GT BENTLEY	Address 2: ISEAUMONT				
Address 3:		Address 3:				
Town:	Colchester	TOWN: CLACTON - ON SEA				
County:	ESSEX	County: ESSEX				
Country:	EMBLAND	Country: EMGLAND				
Postcode:	C078LS	Pastcode: CO16 DAM				

3. Trees Loca	tion			4. Trees Ov		voerovelo soev	_,	
4. Otherwise, ple	at the address shown in ase provide the full address stand (including full po	ess/location of t	he site	Is the applican If 'No' please p owner (if know	arouide the a	of the tree(s): ddress of the erent from the tre	Yes ees location)	□ No
mere the neets,				Title:	F	irst name:		
Init:	House number:	House suffix:		Last name:				
iouse ame:				Company (optional):				
Address 1:				Unit		use mber:	House	
Address 2:				House	nu	moer.		
Address 3:				name: L	-			
-				Address 1:				
Town:				Address 2:				
County:			•——	Address 3:				
Pastcode (if known):				Town:				
f the location is	unclear or there is not a rly as possible where it is	full postal addre	ess, either and to the	County:				
rear of 12 to 18	High Street' or 'Woodlan	d adjoining Elm	Road") or	Country:				
•20000000000000000000000000000000000000	nance Survey grid refere	nce:		Postcode:				
Description:				Telephone nu	umbers			Extensio
				Country code	e: National	number:		number:
						L tautions	n.	
				Country code	e: Mobile i	number (optional	I):	
				Country code	e: Fax num	ber (optional):		
			11-11	Email addres	ss (optional):			
	You Applying For?					Order Detai		e or numb
Are you seekin subject to a TF	g consent for works to t 20?	ree(s) Yes	□ No					
Are you wishin in a conservati	ig to carry out works to t on area?	ree(s) Yes	□ No					
Please identify necessary. You protected by a your sketch planese provide trees are protected planting replace. E.g. Oak (13) - fr	the tree(s) and provide in high tind it useful to control the tree (s) and provide in high tind it useful to control the tree (see guidance notes), at the following informaticated by a TPO you must dement trees (including tell because of excessive st	a full and clear spontact an arborism as shown in the below: tree spalso provide reaquantity, species adding and low ar	secification of (tree surgi- the First Scho- pecies (and sons for the oposition at menity value	of the works you eon) for help wit edule to the TPO the number uses work and, where nd size) or reason . Replant with 1 s	th defining ap where this is d on the sket e trees are be ns for not wa standard ash	ppropriate work. s available. Use the tich plan) and des eing felled, please inting to replant. in the same place	he same num cription of wi e give your pr	bers on orks. When oposals fo
Oak !	tree located to reduce the	in r	ear C	35%,	buch as	it had	Jone	ld
amey	e drom .	strong c	sind 3	. 115 6	een re	educel 5	gare al	SO
amoy	e drom .	strong c	wind S ach	e. 115 b	cuts h	educel be	ejanu al	\ \d

Identification Of Tree(s) And Description Of Works continued		
. Trees - Additional Information		
	alu in nanor f	ormat
dditional information may be attached to electronic communications or provided separat	ciy iii popei ii	V
or all trees		
there halve clearly showing the position of trees listed in Question 7 must be provided when at	plying for wo	rks to trees covered
y a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation would also be helpful if you provided details of any advice given on site by an LPA officer.	alea (see gun	our rolling
The state type of covered by a TPO		
lease indicate whether the reasons for carrying out the proposed works include any of the follow	ving. It so, you	ur application
nust be accompanied by the necessary evidence to support your proposals. (See guidance note	of tortal circles	/
 Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall: 	☐ Yes	r≠ No
If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.		
Alleged damage to property - e.g. subsidence or damage to drains or drives.		1
If YES, you are required to provide for:	☐ Yes	∏ No
Subsidence Subsidence	on monitoria	a data soil roots
A report by an engineer or surveyor, to include a description of damage, vegetati and repair proposals. Also a report from an arboriculturist to support the tree wo	ork proposals.	g data, son, roors
Other structural damage (e.g. drains, walls and hard surfaces)		
Written technical evidence from an appropriate expert, including description of	damage and p	ossible solutions.
Documents and plans (for any tree)	□ Yes	T No
Are you providing separate information (e.g. an additional schedule of work for Question 7)?	1 ies	p 110
If YES, please provide the reference numbers of plans, documents, professional reports, photogr If they are being provided separately from this form, please detail how they are being submitted	aphs etc in sup I.	pport of your applicati

 Authority Employ Vith respect to the Autho 					
a) a member of staff	(c) related to a member of staff	Do any of these sta	stements apply to you?		
an elected member	(d) related to an elected member	Yes	No		
f Yes, please provide det.	alls of the name, relationship and role				
0. Application For	Tree Works - Checklist				
only one copy of the app	lication form and additional information (Quas been completed correctly and that all reed information may result in your application	levant information is submitted	, Please note diatrandic to		
ketch Plan					
 A sketch plan sh 	owing the location of all trees (see Ouestion	18)			
For all trees					
see Question 7)	ion of the trees concerned		П		
	pecification of the works to be carried out		П		
			_		
For works to trees proto see Question 7)	ected by a TPO				
Have you:					
	or the proposed works?				
	nce in support of the stated reasons? in part	icular			
 provided evider if your reas 	ons relate to the condition of the tree(s) - w	ritten evidence from an			
200100	riate expert Illeging subsidence damage - a report by an		yar 🗆		
and on	e from an arboriculturist.				
• in respect	of other structural damage - written technic	al evidence	Ц		
 included all oth 	er information listed in Question 8?				
11. Declaration - Tr	ees	to the form and the assumption	vion plans and additional informatio		
	ees sent/give notice for tree work as described	Or signed - Agent:	lying plans and additional information		
Signed - Applicant:		Or signed - Agent.	V-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
Date (DD/MM/YYYY):					
21/5/2021	(This date must not be before the date of sending or hand-delivery of the form)				
	at Destile	13. Agent Contact De	tails		
12. Applicant Cont	act Details	Telephone numbers			
Telephone numbers	Extension		Extensi numbe		
Country code: Nation	al number: number:	Country code: National r	number:		
		Country and a Makilla and	imber (optional):		
Country code: Mobile	number (optional):	Country code: Mobile nu	anicer (optioner.		
		Country code: Fax numb	ver (ontional):		
	mber (optional):	Country Code: Fax nume	El (Options)		
Country code: Fax nu					
Country code: Fax number Fax number 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)