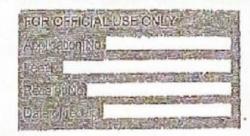


Please send the completed form and certificate to: Planning Services, Town Hall, Rose Hill, Chesterfield S40 1LP Tel: 01246 345811 Fax: 01246 345809

emall: planning@chesterfield.gov.uk Website; www.chesterfield.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

Publication of planning applications on planning authority websites

Please note that with the exception of applicant contact details, the information provided on this application form and in supporting documents may be published on the authority's website.

If you have provided any other information as part of your application which fails within the definition of personal data under the Data Protection Act which you do not wish to be published on the authority's website, 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: MAS First name: LVCY.	Title: First name:
Last name: MCMANUS	Last name:
Company (optional):	Company (optional):
Unit: House 25 House suffix:	Unit: House number: House suffix:
House name:	House name:
Address 1: YEW TREE DRIVE.	Address 1:
Address 2: SOM ERSALL	Address 2:
Address 3:	Address 3:
TOWN: CHESTERFIELD	Town:
County: DERBYSHIRE	County;
Country:	Country:
Postcode: 5403NB	Postcode;

If all trees stand	ation s at the address shown in 0		4. Trees Ownership  Is the applicant the owner of the tree(s): Yes	
	ease provide the full addr s) stand (including full pos		owner (if known and if different from the trees location)	
Unit:	House number:	House suffix:	Title; First name:	-
House	number; [	suilix;	Last name:  Company	_
name: Address 1:			(optional):	_
Address 2:			Unit: number: suffix:	_
Address 3:			name:	-
fown:			Address 1:	
county:		-	Address 2:	_
Postcode			Address 3:	_
(If known):			Town:	•
	unclear or there is not a fi rly as possible where it is (			
rear of 12 to 18	High Street' or Woodland nance Survey grid referen	l adjoining Elm Road') or		
Description:	nance survey gnd referen	ice:	Postcode:	
			Telephone numbers Exten Country code: National number: numb	stor
			Country code: Fax number (optional):  Email address (optional):	
5. What Are	You Applying For? g consent for works to tre	•6	6. Tree Preservation Order Details  If you know which TPO protects the tree(s), enter its title or numbelow.	ber
Are you seekin subject to a Ti				
Are you wishin in a conservati	g to carry out works to tree on area?			
Are you wishin in a conservation of the provided and the provided and provided areas are provided trees are protected by a pour sketch plane planting replaced and planting replaced and planting replaced are provided as a provided areas are protected and planting replaced and planting replaced areas are protected as a provided areas are protected as a protected areas are protected areas are protected as a protected areas are protected areas areas areas are protected areas areas areas are protected areas are	g to carry out works to tree on area?  tion Of Tree(s) And Determine the tree(s) and provide a fundation of the tree (s) and provide a fundation of the following information of the following information of the following information of the following information of the following including quality areas (including quality of the following including quality of the following including quality in the following	Description Of Work full and clear specification stact an arborist (tree sur- as shown in the First Sch below: tree species (and so provide reasons for the antity, species, position a ling and low amenity value		nere

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23		Havle	n° 25			The last the	No 2	O Tree nor h
Trees - Addit	ional Information		0.000	Ballalan de P		SE ELLE		55 (No. 1)
		electronic com	munications	or provided con	talle	In name of		DISTRICT COMM
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rall trees ketch plan clearl a TPO. A sketch would also be hel works to trees		trees listed in Qu notifying the LP, s of any advice g	uestion 7 must A of works to to given on site by osed works inc	be provided who rees in a conserve an LPA officer.	en apply ation are	ing for worl a (see guld . If so, your	ks to trees ance notes applicatio	:).
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9. Application For Tree Works - Checklist	
Only one copy of the application form and additional information (Question 8) is required. Please use the g make sure that this form has been completed correctly and that all relevant information is submitted. Pleas supply precise and detailed information may result in your application being rejected or delayed. You do no but it may help you to submit a valid form.	e note that fallure 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 8)	
Have you:	
stated reasons for the proposed works?	
<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 appropriate expert</li> </ul>	
<ul> <li>If you are alleging subsidence damage - a report by an appropriate engineer or surveyor</li> </ul>	
and one from an arboriculturist.  in respect of other structural damage - written technical evidence	П
<ul> <li>Included all other Information listed in Question 8?</li> </ul>	
10. Declaration - Trees	OBTAIN NATIONAL
I/we hereby apply for consent/give notice for tree work as described in this form and the accompanying plans	s and additional information.
Or signed - Agent:	
Di	
14. 9. 2021 (This date must not be before the date of sending or hand-delivery of the form)	
	at constitutions and other
11. Applicant Contact Details 12. Agent Contact Details	
Telephone numbers  Extension  Extension	Extension
Country code: National number:   Country code: National number:	number:
Country code: Mobile number (opti	onal):
County county	
Country code: Fax number (optional): Country code: Fax number (optional):	ai):
En 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)