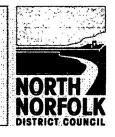
Planning Section

North Norfolk District Council
Holt Road, Cromer, Norfolk NR27 9EN
Telephone: 01263 516150 / 516151 / 516143

email: planning@north-norfolk.gov.uk

NORTH NORFOLK D.C.

19 APR 2022



POSTAL SERVICES

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. Applica	nt Name and Address	2. Agent Name and Address			
Title:	First name:	Title: Mr First name: TRRRY			
Last name:		Last name: lox -			
Company (optional):		Company (optional): N·N·7·8			
Unit:	House number: House suffix:	Unit: House 12 House suffix:			
House name:		House name:			
Address 1:		Address 1: Kallina Closa.			
Address 2:		Address 2:			
Address 3:		Address 3:			
Town:		Town: MOCT			
County:		County:			
Country:		Country:			
Postcode:		Postcode: NR 25 6RU			

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	Title: First name:							
House Sunt Sunt	Last name: Company							
name:	(optional):							
Address 1:	Unit: House House suffix:							
Address 2:	House name: HONN PIR HOUSE, Address 1: WALL LANK							
Address 3:	Address 1: WALL CAWR							
Town:	Address 2:							
County:	Address 3:							
Postcode (if known):	TOWN: WIVETON							
If the location is unclear or there is not a full postal address, either	County:							
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	Country:							
provide an Ordnance Survey grld reference: Description:	Postcode: NR 25776							
	Telephone numbers Extension							
	Country code: National number: number:							
	Country code: Mobile number (optional):							
,	Country code. Mobile Inditiber (optional):							
	Country code: Fax number (optional):							
	Email address (optional):							
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)								
in a conservation area?								
7. Identification Of Tree(s) And Description Of Works								
Please identify the tree(s) and provide a full and clear specification of								
necessary. You might find it useful to contact an arborist (tree surged protected by a TPO, please number them as shown in the First Sched								
your sketch plan (see guidance notes). Please provide the following information below: tree species (and th	a number used on the skatch plan) and description of works Where							
trees are protected by a TPO you must also provide reasons for the w	ork and, where trees are being felled, please give your proposals for							
planting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value. F								
r								
MAJOR POOT (W CRASS WTO MAIN SEWER.								
Also Cornie Coverin 34	CARACK							

7. Identification Of Tree(s) And Description Of Works continued								
Pucarypro " Hows.								
8. Trees - Additional Information								
8. Trees - Additional Information Additional information may be attached to electronic communications or provided separate	ah in nanar	format						
Additional information may be attached to electronic communications or provided separal	ely in paper	iornat.						
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 following. If so, your application must be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)								
 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	<u> </u>						
2. 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, 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.								
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, photogral they are being provided separately from this form, please detail how they are being submitted.		port of your application.						

9. Authority Employee										
With respect to the Authority (a) a member of staff	y, I am: (c) related to a member o	of staff	Do any of these statements apply to you?							
(b) an elected member	(d) related to an elected r		Yes [] No							
If Yes, please provide details	of the name, relationship	and role	0 0000000000000000000000000000000000000		لسا					
10. Application For Tre	e 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 supply precise and detailed i but it may help you to submi	been completed correctly nformation may result in y	and that all re	elevant Informat	ion is submitted. Please i	note that failure	to				
Sketch Plan										
A sketch plan showl	ng the location of all trees	(see Question	18)							
For all trees (see Question 7)										
 Clear identification (of the trees concerned				Q					
 A full and clear spec 	lfication of the works to be	carried out								
For works to trees protecte (see Question 7)	d by a TPO				*					
Have you:										
 stated reasons for th 	e proposed works?									
	n support of the stated rea									
appropriate	relate to the condition of t expert	ine tree(s) - wr	ritten evidence ti	rom an						
 If you are allegi 	ing subsidence damage - a	report by an	appropriate eng	ineer or surveyor		,				
	m an arboriculturist. her structural damage - wi	ritten technica	ıl evidence		m					
• Included all other in	formation listed in Questio	n 87			<u> </u>					
11. Declaration - Trees										
/we hereby apply for planning nformation. I/we confirm that	g permission/consent as d	escribed in th	is form and the a	ccompanying plans/dra	wings and addit	ional				
jenuine opinions of the perso	n(s) giving them.	owieuge, any			y opinions give	i are the				
Signed - Applicant:			Or signed - Age	nt:						
Date (DD/MM/YYYY):										
13/4/22 of	his date must not be befor sending or hand-delivery	e the date of the form)								
2. Applicant Contact D)etails		13. Agent C	ontact Details						
Telephone numbers		Fotonsian	Telephone nur	mbers		F. Assadas				
Country code: National nur		Extension number:	Country code:	National number		Extension number:				
			01263	713389^						
Country code: Mobile num	ber (optional):	ا	Country code:		nal):	<u></u>				
Country code: Fax number	(optional):		Country code:	Fax number (optional):					
Email address (optional):			Email address							
		NW TARRS @ Consil: Con'								

Electronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in the same manner.

(Please see guldance notes)