9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (d) related to an elected member If Yes, please provide details of the name, relationship and role	Do any of these statements apply to you?
in 166, produce provide detaile of the name, relationisms and role	Almanda at a calability of the
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 Question For all trees (see Question 7) Clear identification of the trees concerned 	8) (ON APPLICATION) FORM)
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?	Additional interpretation captro attended to shall one complexity.
 provided evidence in support of the stated reasons? in particular: if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert if you are alleging subsidence damage - a report by an appropriate engineer or surveyor and one from an arboriculturist. in respect of other structural damage - written technical 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 information. I/we confirm that, to the best of my/our knowledge, any facts stagenuine opinions of the person(s) giving them. Signed - Applicant: Or sign Date (DD/MM/YYYY): (This date must not be before the date of sending or hand-delivery of the form)	
Telephone numbers Country code: National number: Extension number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: 8318 2530 Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): ANTON 5950 BTINTELNET, 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)