

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

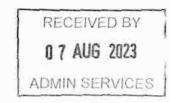
This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

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 subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority is 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 at commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:





Growth and Regeneration Business Uni Castle House, Great North Road, Newark, Nottinghamshire NG24 1B

> Telephone: 01636 65000 Email: customerservices@nsdc.inf

Website: www.newark-sherwooddc.gov.uk/planning

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 requany 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. Applic	ant Name and Address	2. Agent Name and Address			
Title:	MRS First name: ANN	Title: First name:			
Last name:	GIBSON	Last name:			
Company (optional):	N/A	Company (optional):			
Unit:	House number: House suffix:	Unit: House House suffix:			
House name;	ROSE COTTAGE	House name:			
Address 1:	MAIN STREET	Address 1:			
Address 2:	NORWELL	Address 2:			
Address 3:		Address 3:			
Town:		Town:			
County:	NOTTINGHAMSHIRE	County:			
Country:	ENGLAND	Country:			
Postcode:	NG236JN	Postcode:			

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)			
House House	Title: First name:			
number: suffix:	Last name:			
House name:	Company (optional):			
Address 1:	House House			
Address 2:	House			
Address 3:	name:Address 1:			
Town:	Address 2:			
County:				
Postcode	Address 3:			
(if known): If the location is unclear or there is not a full postal address, either	Town:			
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:			
	Telephone numbers Exten			
]	Country code: National number: numb			
}	Country code: Mobile number (optional):			
}	Southly cook. Wobile Halfiber (Opinorias).			
(1)	Country code: Fax number (optional):			
{ ·	Email address (optional):			
L				
5. What Are You Applying For?	6. Tree Preservation Order Details			
Are you seeking consent for works to tree(s) Yes No subject to a TPO?	If you know which TPO protects the tree(s), enter its title or numbelow.			
Are you wishing to carry out works to tree(s) Yes No				
in a conservation area? Yes No				
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 Scheo				
your sketch plan (see guidance notes). Please provide the following information below: tree species (and the	ne number used on the sketch nian) and description of works. Wh			
trees are protected by a TPO you must also provide reasons for the w	vork and, where trees are being felled, please give your proposals			
planting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value.				
Flowering Cherry ful because of e FLOWERING CHERRY-FELL BE	xcessive shading			
AND THE HEIGHT IS ALLES	CAUSE OF EXCESSIVE SHADING			
AND THE HEIGHT IS ALMOST REPLANT WITH SHRUBS	IMPINGING ON TELEPHONE WIRE			
LOCATED AT THE BOUNDARY	OF FRONT GARDEN			

SKETCH	PLAN : ROSE				
ROSE COTTAGE	CHERRY TREE O DRIVE	MAIN STREE!			
8. Trees - Additi	onal Information				
For all trees A sketch plan clearly by a TPO. A sketch pl It would also be help For works to trees c Please indicate wheth	her the reasons for carrying	ees listed in Question hifying the LPA of wo of any advice given o gout the proposed w	7 must be provided whorks to trees in a conservant site by an LPA officer.	ien applying for wo ration area (see gul following. If so, yo	orks to trees covered idance notes). ur application
Condition of the lif YES, you	ed by the necessary evidence the tree(s) - e.g. it is disease to are required to provide we tic information from an app	ed or you have fears vritten arboricultural	that it might break or fa		etails) No
If YES, yo Subsic A repo and re Other Writte	ort by an engineer or survey epair proposals. Also a repo structural damage (e.g. drai en technical evidence from	or: yor, to include a desc ort from an arboriculi ins, walls and hard su	cription of damage, vege turist to support the tree orfaces)	e work proposals.	
If YES, please provide	parate information (e.g. an a e the reference numbers of wided separately from this f	plans, documents, p	rofessional reports, pho	itographs etc in suj	☑ No oport of your applicati
means related, by birt conclude that there w	ployee / Member sciple of decision-making the character of the character of the diagram of the day statements apply to you	ugh that a fair-minde ecision-maker in the	ed and informed observ local planning authority (es	er, having consider y. n respect to the aut n member of staff an elected member	red the facts, would thority, I am:
If Yes, please provide	details of their name, role a	and how you are rela	(d) r	elated to a membe elated to an electe	

10. Application For Tree Works - Checklist	
Only one copy of the application form and additional information (Question 8) is required. Please use the make sure that this form has been completed correctly and that all relevant information is submitted. Pleasupply precise and detailed information may result in your application being rejected or delayed. You do but it may help you to submit a valid form.	ase note that failure to
Sketch Plan	
 A sketch plan showing the location of all trees (see Question 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)	142
Have you:	
 stated reasons for the proposed works? 	
 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? 	
information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate an genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent: Date (DD/MM/YYYY): (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 Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Extension number: Country code: National number (country code: Mobile number (country code: Fax number (optional)): Email address (optional):	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)