## **Planning Section**

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

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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. Applicant Name and Address			
Title:	First name:		
Last name:			
Company (optional):	Friary Caravan Part		
Unit:	House number: House suffix:		
House name:			
Address 1:	Cley Road		
Address 2:	Blakeney		
Address 3:			
Town:	Halt		
County:	Norfolk		
Country:			
Postcode:	NR25 7NW		

2. Agent Name and Address			
Title:	MR First name: DAOID		
Last name:	GILLETT		
Company (optional):	DAVID GILLETT TREG SERVICES		
Unit:	House number: 14 House suffix:		
House name:	THE HOMESTEAD		
Address 1:	14 BOOTON ROAD		
Address 2:	CAWSTON		
Address 3:			
Town:	NORWICH		
County:	NORFOUL		
Country:			
Postcode:	RRIO 4AH		

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 number: suffix:	Title: First name:		
House name:	Last name: Company		
Address 1:	(optional):  Unit:  House  House  number:  suffix:		
Address 2:	House name:		
Address 3:	Address 1:		
Town:	Address 2:		
County:	Address 3:		
Postcode (if known):	Town:		
If the location is unclear or there is not a full postal address, either 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 Extension Country code: National number: number:		
	Country code: National number: number:		
	Country code: Mobile number (optional):		
	Country code: Fax number (optional):		
	Email address (optional):		
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 number below.		
Are you wishing to carry out works to tree(s) res No 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 surgeous protected by a TPO, please number them as shown in the First Schedu your sketch plan (see guidance notes).  Please provide the following information below: tree species (and the trees are protected by a TPO you must also provide reasons for the world planting replacement trees (including quantity, species, position and E.g. Oak (T3) - fell because of excessive shading and low amenity value. Reference of the state	n) for help with defining appropriate work. Where trees are ule to the TPO where this is available. Use the same numbers on e number used on the sketch plan) and description of works. Where ork and, where trees are being felled, please give your proposals for size) or reasons for not wanting to replant.		
G1 - Group of 3 overg	prown Blad Horns to		
pros mithin a	rec		

. Identification Of Tree(s) And Description Of Works continued		and the contraction and the cold wind all growth angue in the cold and a companion or against a security and a
Trees - Additional Information		
dditional information may be attached to electronic communications or provided separ	rately in paper	format.
sketch plan clearly showing the position of trees listed in Question 7 must be provided when 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.  For works to trees covered by a TPO ease indicate whether the reasons for carrying out the proposed works include any of the follows be accompanied by the necessary evidence to support your proposals. (See guidance not	on area (see gu	uidance notes).  our application
<ol> <li>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.     </li> </ol>	☐ Yes	□ No
<ol> <li>Alleged damage to property - e.g. subsidence or damage to drains or drives.         If YES, you are required to provide for:     </li> </ol>	☐ Yes	□ No
Subsidence A report by an engineer or surveyor, to include a description of damage, vegeta and repair proposals. Also a report from an arboriculturist to support the tree w		g data, soil, roots
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.
e you providing separate information (e.g. an additional schedule of work for Question 7)?	☐ Yes	┌ No
ES, please provide the reference numbers of plans, documents, professional reports, photogr hey are being provided separately from this form, please detail how they are being submitted		oport of your application.
see attached Plan For loca	ation	

9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (c) related to a member of staff Do any	of these statements apply to you?				
(b) an elected member (d) related to an elected member $Yes$					
If Yes, please provide details of the name, relationship and role					
10. Application For Tree Works - Checklist					
Only one copy of the application form and additional information (Question 8) is required make sure that this form has been completed correctly and that all relevant information is supply precise and detailed information may result in your application being rejected or obut it may help you to submit a valid form.	s submitted. Please note that failure 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>	<del></del>				
For works to trees protected by a TPO (see Question 7)					
Have you:					
stated reasons for the proposed works?					
<ul> <li>provided evidence in support of the stated reasons? in particular:</li> <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 enginee</li> </ul>	er or surveyor				
<ul> <li>and one from an arboriculturist.</li> <li>in respect of other structural damage - written technical evidence</li> </ul>					
included all other information listed in Question 8?					
/We hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated argenuine opinions of the person(s) giving them.  Signed - Applicant:  Or signed - A  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 Cont	act Details				
Telephone numbers	rs Extension				
Country code: National number: Extension number: Country code: N					
Country code: Mobile number (optional): Country code: M	Nobile number (optional):				
Country code: Fax number (optional): Country code: Fax	ax number (optional):				
Email address (optional):	ional):				

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)