

1. Applicant Name and Address

MR

Title:

District Council Offices Kesteven Street Sleaford Lincolnshire NG34 7EF

Application for Tree Works

| For office use | only | Ref no:/ | |
|----------------|------|----------|--|

Surname:

SUAW

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 from 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 falls 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.

First Name: THOMAS

| Company (C | Optional): ASU | COUNTRY Momes . | | | |
|-------------|---------------------------|--|---------------|--|--|
| Unit: | | House Number: | House Suffix: | | |
| House Nam | ame: RESIDENTIAL DEVEROPM | | OFF | | |
| Address 1: | MAIN STREET | | | | |
| Address 2: | NORTH RANCEBY | | | | |
| Address 3: | | | | | |
| Town: | | County: | Country: | | |
| Postcode: | NG348QP. | A A LANGE OF THE STATE OF THE S | | | |
| 2. Agent Na | me and Address | | | | |
| Title: | * | First Name: | Surname: | | |
| Company (C | Optional): | | | | |
| Unit: | | House Number: | House Suffix: | | |
| House Nam | e: | | | | |
| Address 1: | | | | | |
| Address 2: | | | | | |
| Address 3: | | | | | |
| Town | | County: | Country: | | |
| Postcode: | | | | | |
| | | | | | |

| | dress shown in Question 1, go to f the site where the tree(s) stand | | |
|---|---|---|----------------|
| Unit: | House Number: | House Suffix: | noro aranasio, |
| House Name: | , rodo ramo. | Tiodoo Gallin. | |
| Address 1: | | | |
| Address 2: | | | |
| Address 3: | | | |
| Town: | County: | Postcode (if known | n); |
| | r there is not a full postal address Land to the rear of 12 to 18 High Survey grid reference: | | |
| | | | |
| Is the applicant the owner | | Yes / | No solution). |
| Is the applicant the owner | of the tree(s): address of the owner (if known a | | |
| Is the applicant the owner If 'No' please provide the | address of the owner (if known a | nd if different from the tree | |
| Is the applicant the owner If 'No' please provide the Title: Company (optional): | address of the owner (if known a | nd if different from the tree | |
| s the applicant the owner f 'No' please provide the Title: Company (optional): House Suffix: | address of the owner (if known a First Name: Unit: | nd if different from the tree | |
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| s the applicant the owner f 'No' please provide the strike: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: | address of the owner (if known a First Name: Unit: House Name: County: | Last Name: House Number: Country: | es location). |
| s the applicant the owner f 'No' please provide the a little: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: | address of the owner (if known a First Name: Unit: House Name: County: National number: | Last Name: House Number: Country: | es location). |
| Is the applicant the owner of 'No' please provide the state of 'No' please provide of 'No' please of | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): | Last Name: House Number: Country: | es location). |
| Is the applicant the owner of 'No' please provide the activitie: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: Country code: country code: email address (optional): | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): Fax number (optional): | Last Name: House Number: Country: | es location). |
| Title: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: Country code: Country code: email address (optional): 5. What Are You Applying | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): Fax number (optional): | Last Name: House Number: Country: Extension Numb | es location). |

| | dress shown in Question 1, go to f the site where the tree(s) stand | | |
|---|---|---|----------------|
| Unit: | House Number: | House Suffix: | noro aranasio, |
| House Name: | , rodo ramo. | Tiodoo Gallin. | |
| Address 1: | | | |
| Address 2: | | | |
| Address 3: | | | |
| Town: | County: | Postcode (if known | n); |
| | r there is not a full postal address Land to the rear of 12 to 18 High Survey grid reference: | | |
| | | | |
| Is the applicant the owner | | Yes / | No solution). |
| Is the applicant the owner | of the tree(s): address of the owner (if known a | | |
| Is the applicant the owner If 'No' please provide the | address of the owner (if known a | nd if different from the tree | |
| Is the applicant the owner If 'No' please provide the Title: Company (optional): | address of the owner (if known a | nd if different from the tree | |
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| s the applicant the owner f 'No' please provide the a little: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: | address of the owner (if known a First Name: Unit: House Name: County: National number: | Last Name: House Number: Country: | es location). |
| Is the applicant the owner of 'No' please provide the state of 'No' please provide of 'No' please of | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): | Last Name: House Number: Country: | es location). |
| Is the applicant the owner of 'No' please provide the activitie: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: Country code: country code: email address (optional): | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): Fax number (optional): | Last Name: House Number: Country: | es location). |
| Title: Company (optional): House Suffix: Address 1: Address 2: Address 3: Town: Country code: Country code: Country code: email address (optional): 5. What Are You Applying | Address of the owner (if known a First Name: Unit: House Name: County: National number: Mobile number (optional): Fax number (optional): | Last Name: House Number: Country: Extension Numb | es location). |

6. Tree Preservation Order Details

If you know which TPO protects the tree(s), enter its title or number below:

7. Identification of Tree(s) And Description Of Works

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on your sketch plan (see guidance notes).

Please provide the following information below: tree species (and the number used on the sketch plan) and description of works. Where trees are protected by a TPO you must also provide reasons for the work and, where trees are being felled, please give you proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant. E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.

ASH TEGE

WE WOULD LIKE TO REDUCE THE TREE AND ALSO
REMOVE ALL DEAD WOOD, THE TREE CURRELTLY OVER HANGS
NEIGHBOURING DEIVEWAYS AND RISIES DAMAGING CARS
DUE TO FALLING BRANCHES.

8. Trees - Additional Information

Additional information may be attached to electronic communications or provided separately in paper format.

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).

- 1. Condition of tree(s) e.g. it is diseased or you have fears that it might break or fall: Yes If yes, you are required to provide written arboriculture advice or other diagnostic information from an appropriate expert.
- 2. Alleged damage to property e.g. subsidence or damange to drains or drives. If yes, you are required to provide for:

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 aboriculturist 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)?

If yes, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application. If they are being provided separately from this form, please detail how they are being submitted.

ATTACHED IS A SITE PLAN AND A PICTURE OF THE TREE WHICH CLEARLY SHOWS THE AMOUNT OF DEAD WOOD ON THE TREE

| the guidance and this checkli- relevant information is submit | st to make sure that this form hat ted. Please note that failure to being rejected or delayed. You | as been completed correctly and that all supply precise and detailed information do not need to fill out this section, but it | | |
|---|--|---|--|--|
| Sketch Plan A sketch plan showing the Id | ocation of all trees (See Question | 8) | | |
| | ocation of all trees (see Guestion) | 3) | | |
| For all trees (see Question 7) • Clear identification of the tree | es concerned | | | |
| | of the works to be carried out | | | |
| For works to trees protecte | d by a TPO (see Question 8) | | | |
| Have you: | * | | | |
| stated reasons for the proportion | osed works? | | | |
| if your reasons relate to the appropriate expert if you are alleging subside surveyor and one from an | ral damage - written technical e | ppropriate engineer or | | |
| 10. Declaration - Trees | | | | |
| I/we hereby apply for consensaccompanying plans and add | t/give notice for tree work as de litional information. | scribed in this form and the | | |
| Signed - Applicant | Or Signed - A | gent: | | |
| Date: 21 / 10 | / 23 (This date must not be be | efore the date of sending or hand-delivery of the form) | | |
| 11. Applicant Contact Detai | ls | 10.2 The 10.2 Sec. 1 | | |
| Country code: | National number: | Extension Number: | | |
| Country code: | Mobile number (optional): | | | |
| Country code: | Fax number (optional): | | | |
| email address (optional): | | | | |
| 12. Agent Contact Details | | | | |
| Country code: | National number: | Extension Number: | | |
| Country code: | Mobile number (optional): | | | |
| Country code: Fax number (optional): | | | | |
| email address (optional): | | | | |

9. Application For Tree Works - Checklist

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)

EG20075RT_7,13