Tree Team, Shropshire Council PO Box 4826, Shrewsbury SY1 9LJ Tel: 01743 25 3333 Email: trees@shropshire.gov.uk



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.

Applicant Name and Address		
Title: MATTHEW		
Last name: PINCHES		
Company (optional): MP Tree Surgery		
Unit: House number: House suffix:		
House name: HOLLIES FARM		
Address 1: Gatten		
Address 2: PONTES BURY		
Address 3: SHREWSBURY		
Town:		
County: SHROPSHIRE		
Country: ENGLAND		
Postcode: 545 05 I		

2. Agent Name and Address		
Title: Mr First name: MATTHEW		
Last name: PINCHES		
Company (optional): MP Tree Surgery		
Unit: House number: House suffix:		
House name: HOLLIES FARM		
Address 1: GATTEN		
Address 2: PONTESBURY		
Address 3: SHREWSBURY		
Town:		
County: SHROPSHIRE		
Country: ENGLAND		
Postcode: SY5055		

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 number: 7 House suffix: House name: 7 Edge Close Address 1: Bagston hill Address 2: Shrewsburg Address 3: Town:	Title: First name: DAVID Last name: MORRIS Company (optional): Unit: House number: House suffix: House name: Address 1: Edge Close Address 2: Bassen hill
County: Postcode (if known):	Address 3:
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 rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or provide an Ordnance Survey grid reference: Description:	County: Shrapshire Country: Postcode: Telephone numbers
	Country code: National number: Extension 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 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? Are you wishing to carry out works to tree(s) Yes In a conservation area?	below.
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 the necessary. You might find it useful to contact an arborist (tree surgeon protected by a TPO, please number them as shown in the First Schedul 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 worplanting replacement trees (including quantity, species, position and si E.g. Oak (T3) - fell because of excessive shading and low amenity value. Rep) for help with defining appropriate work. Where trees are le to the TPO where this is available. Use the same numbers on number used on the sketch plan) and description of works. Where rk and, where trees are being felled, please give your proposals for ize) or reasons for not wanting to replant. plant with 1 standard ash in the same place.
To carry out a 25% of Sycamore that Spreads of Aim is to pull in over ex	Across 4 Gardens.
Aim is to pall in over ex	tending Limbs And

7. Identification Of Tree(s) And Description Of Works continued			
Bring the tree into 2 Mare controlled gize			
A full crown reduction of 25%			
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 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.			
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.			

Written technical evidence from an appropriate expert, including description of damage and possible solutions.

If YES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application.

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Other structural damage (e.g. drains, walls and hard surfaces)

Are you providing separate information (e.g. an additional schedule of work for Question 7)?

If they are being provided separately from this form, please detail how they are being submitted.

Documents and plans (for any tree)

9. Authority Employee / Member		
With respect to the Authority, I am:		
(a) a member of staff (c) related to a member of staff (b) an elected member (d) related to an elected member	Do any of these statements apply to you?	
	(V)Yes (V)No	
If Yes, please provide details of the name, relationship and role	10	
Contractor to carry	out proposed works	
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) 	on 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)		
Have you:		
 stated reasons for the proposed works? 	r√1	
 provided evidence in support of the stated reasons? in par if your reasons relate to the condition of the tree(s) - vappropriate expert if you are alleging subsidence damage - a report by an and one from an arboriculturist. in respect of other structural damage - written technical included all other information listed in Question 8? 	n appropriate engineer or surveyor	
11. Declaration - Trees I/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 are true and accurate and any opinions given are the 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	Telephone numbers	
Extension Country code: National number: number:	Country code: National number: Extension number:	
Country code: Mobile number (optional):	Country code: Mobile number (optional):	
Country code: Fax number (optional): Email address	Country code: Fax number (optional): Email address	
Electronic communication - If you submit this form by fax or e-mail the		

A fill a garrangel of Royal Mall SHROPSHIRE COUNCIL Abbey Foregate SYZ GND Trees, hedges and woodlands