

P & ER DEVELOPMENT CONTROL

REC'D 18 DEC 2023

County Hall Beverley East Riding of Yorkshire HU17 9BA

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	2. Agent Name and Address
Title: First name: SAVED	Title: MR First name: MEL
Last name: MOHUNGOO	Last name: SARVIS
Company (optional):	Company (optional): BM TREE SER VICES
Unit: House number: 33 House suffix:	Unit: House number: L House suffix:
House name: FROGNALL HOUSE	House name:
Address 1: TRANBY LANE	Address 1: SPAINC, HEAD AVE
Address 2:	Address 2:
Address 3:	Address 3:
Town: SWANLAND	Town: HULL
County:	County:
Country:	Country:
Postcode: HU143 NE	Postcode: HJ55HZ

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)	
	Title: First name:	
Unit: House House suffix:	Last name:	
House name:	Company (optional):	
Address 1:	Unit: House House 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	
× 1	Country code: National number: number:	
P & ER DEVELOPMENT CONTROL	Country code: Mobile number (optional):	
REC'D 18 DEC 2023	Country code: Fax number (optional):	
	Email address (optional):	
	Errai dadi ess (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	below.	
subject to a TPO?		
Are you wishing to carry out works to tree(s) 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 surge protected by a TPO, please number them as shown in the First Sche	on) for help with defining appropriate work. Where trees are	
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 your proposals for		
planting replacement trees (including quantity, species, position an E.g. Oak (T3) - fell because of excessive shading and low amenity value.	d size) or reasons for not wanting to replant. Replant with 1 standard ash in the same place.	
BEECH TI - THIN CROWN BY	APPROX. 108 REMOVING DEAD &	
CROSSING BRANC	S FROM LOWER LIMBS THAT	
REMOVE BRANCHE	S FROM LOWER LIMBS THAT	
	DOWN WARDS	

7. Identification Of Tree(s) And Description Of Works continued			
PRIM BRANCES INAT ARE GROWIN	IS INTO BRANCHES OF		
(T2) OAK.			
DAK, TZ. REMOVE ANY DEAD GROWTH CA	USES BY OVERGROWN		
BEECH BRANCHES,			
SOTH TREES ARE SITUATED IN	FRONT GARDEN.		
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 must be accompanied by the necessary evidence to support your proposals. (See guidant)			
 Condition of the tree(s) - e.g. it is diseased or you have fears that it might break o If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert. 	rfall:		
 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, and repair proposals. Also a report from an arboriculturist to support the			
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including descrip	tion 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	17)?		
If YES, please provide the reference numbers of plans, documents, professional reports, plants are being provided separately from this form, please detail how they are being su			
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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 If Yes, please provide details of the name, relationship and role	Do any of these statements apply to you? Yes No	
10. Application For Tree Works - Checklist		
Only one copy of the application form and additional information (Qu make sure that this form has been completed correctly and that all rel supply precise and detailed information may result in your application but it may help you to submit a valid form.	evant information is submitted. Please 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)	P & ER DEVELOPMENT CONTROL REC'D 18 DEC 2023	
Have you: stated reasons for the proposed works?		
 provided evidence in support of the stated reasons? in partice if your reasons relate to the condition of the tree(s) - wroappropriate expert if you are alleging subsidence damage - a report by an and one from an arboriculturist. in respect of other structural damage - written technication included all other information listed in Question 8? 	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)		
Telephone numbers Country code: National number: Country code: Mobile number (optional): +++ Country code: Fax number (optional): Email address (optional):	Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): Email address (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)