

Environment Cheltenham Borough Council Municipal offices, Promenade, Cheltenham, GL50 9SA

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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	2. Agent Name and Address	
Title: MRS First name: JENNIFER	Title: First name:	
Last name: McCORMIUL _	Last name:	
Company (optional):	Company (optional):	
Unit: House number: 1 House suffix:	Unit: House number: House suffix:	
House name:	House name:	
Address 1: TOM PRICE CLOSE	Address 1:	
Address 2:	Address 2:	
Address 3:	Address 3:	
TOWN: CHECTENHAM.	Town:	
County: GLOUSTERSHIRE-	County:	
Country:	Country:	
Postcode: GLS2 ZLE.	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)			
Unit: House House	Title: MRS First name: JENNIFER			
House number: 11 suffix:	Last name: MCCORMICK _			
name:	Company (optional):			
Address 1: TOM PRICE CLOSE—	Unit: House number: 1) House suffix:			
Address 2:	House name:			
Address 3:	Address 1: TOM PRILE CLOSE			
TOWN: CHELTENHAM -	Address 2:			
County: GLOWTERSHIRE -	Address 3:			
Postcode (if known): GWZ ZLE.	Town: CHELTENHAM -			
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: GLSZ 2LE			
3-5 meters from front of	Telephone numbers Extension			
House to the left as	Country code: National number: number:			
	Country code:			
facility the house_on				
house owed land.	Country code:			
	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 below.			
Are you seeking consent for works to tree(s) Yes No Subject to a TPO?	Delow.			
Are you wishing to carry out works to tree(s)				
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 o				
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).				
	ne number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for			
planting replacement trees (including quantity, species, position and 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.			
Silver Berch, 3-5 meters from house, causing domaine				
Silver Berch, 3-smeters from house, causing domage to walk & drainage, It is too by a too close, propose too remove & grind stump out.				
propose too remove & gr	nd stump out.			
	'			

7. Identification Of Tree(s) And Description Of Works continued				
The tree in question has been id rish too the property in the enclose I have highlighted the areas in we of consern in regards the tree was in the tree.		ed us a eport. report that		
8. Trees - Additional Information				
Additional information may be attached to electronic communications or provided separate	ely in paper f	format.		
For all trees A sketch plan clearly showing the position of trees listed in Question 7 must be provided when ap by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation 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 follow must be accompanied by the necessary evidence to support your proposals. (See guidance notes 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	area (see gui	dance notes). ur application		
diagnostic information from an appropriate expert. 2. 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. 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)?	Yes	T-No		
If YES, please provide the reference numbers of plans, documents, professional reports, photograp. If they are being provided separately from this form, please detail how they are being submitted.	hs etc in sup	port of your application.		

9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (c) related to a member of staff (d) related to an elected member	Do any of these sta	atements apply to you?
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 (Q make sure that this form has been completed correctly and that all resupply precise and detailed information may result in your application but it may help you to submit a valid form.	elevant information is submitted	d. Please note that failure to
Sketch Plan		
 A sketch plan showing the location of all trees (see Question 	18)	
For all trees (see Question 7) • Clear identification of the trees concerned • A full and clear specification of the works to be carried out		T T
For works to trees protected by a TPO (see Question 7)		
Have you: • stated reasons for the proposed works?		
 provided evidence in support of the stated reasons? in parti if your reasons relate to the condition of the tree(s) - we appropriate 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? 	ritten evidence from an appropriate engineer or survey	or D
11. Declaration - Trees		
/we hereby apply for consent/give notice for tree work as described i		ing plans and additional information
Signed - Applicant:	Or signed - Agent:	
Date (DD/MM/YYYY):	L	
(This date must not be before the date of sending or hand-delivery of the form)		
12. Applicant Contact Details	13. Agent Contact Deta	ils
Telephone numbers Extension	Telephone numbers	Extension
Country code: National number: number:	Country code: National nu	
Country code: Mobile number (optional):	Country code: Mobile num	ber (optional):
Country code: Fax number (optional):	Country code: Fax number	/antionally
Country code: Fax number (optional):	Country code: Fax number	(optional).
Email address (optional):	Email address (optional):	
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Electronic communication - if you submit this form by fax of e-mail the LPA may communicate with you in the same manner.