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 not 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: MM First name: 5-72/14cbs	Title: First name:			
Last name: SKYNEN	Last name:			
Company (optional): 57. TARRY FEINE ORC	Company (optional):			
Unit: House number: House suffix:	Unit: House number: House suffix:			
House 84 WOOLACOMBE RD	House name:			
A ss 1:	Address 1:			
Address 2:	Address 2:			
Address 3:	Address 3:			
Town: LIVERPOOL	Town:			
County:	County:			
Country:	Country:			
Postcode: L16 95R	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 suffix:	Title: First name:
House ST JAMES CHURCH	Last name:  Company
Address 1: CHURCH ROAD SOUTH	(optional):    House   House   House   Suffix:
Address 2: WOOLTON	House name:
Address 3:	Address 1:
Town:	Address 2:
County:	Address 3:
Postcode (if known): L25	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: Mobile number (optional):
	Country code: Fax number (optional):
	Email address (optional):
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5. What Are You Applying For?	
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Are you seeking consent for works to tree(s)	6. Tree Preservation Order Details  If you know which TPO protects the tree(s), enter its title or number below.
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7. Identification Of Tree(s) And Description Of Works continued	
70 LITRE CUNTAINER OR ROOT BALL.	
R rees - 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 to a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a constant would also be helpful if you provided details of any advice given on site by an LPA office.  For works to trees covered by a TPO Please indicate whether the reasons for carrying out the proposed works include any of the	ervation area (see guidance notes). er.
must be accompanied by the necessary evidence to support your proposals. (See guidant	
<ol> <li>Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.</li> </ol>	fall: Yes No
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, v 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 descript	ion of damage and possible solutions.
<b>Documents and plans (for any tree)</b> 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, plant they are being provided separately from this form, please detail how they are being sub	
SEE SITE PLAN DENTIFYING TREES.	

9. Authority Employe	/ Member	<del></del>	<del></del>			
With respect to the Authorit			5	 	وينون وهيناسياء وه	
(a) a member of staff (b) an elected member	(c) related to a member of (d) related to an elected m			of these statemen		1
i			Yes	:	No	
If Yes, please provide details	of the name, relationship a	ind role				<del></del>
1	•					
L				<u> </u>	1	<u> </u>
10. Application For Tre	Works - Chacklist	T		1		
• •	Į.					
Only one copy of the applica make sure that this form has supply precise and detailed i but it may help you to subm	been completed correctly information may result in year.	and that all rele	evant information i	s submitted. Pleas	se note that failure to	o
Sketch Plan				1		
A sketch plan show	ing the location of all trees	(see Question (	8)	i		
For all trees (see Question 7)  • Clear identification				i i		
A full and clear spec	cification of the works to be	carried out				
For works to trees protected (see Question 7)	ed by a TPO					
Have you:		d .			•	
stated reasons for t	he proposed works?	i i		, .		
<ul><li>if your reasons appropriat</li><li>if you are alleg</li></ul>	ging subsidence damage - a	the tree(s) - wri	tten evidence from		i i	
	om an arboriculturist.			il .		
• in respect of o	ther structural damage - w	ritten technica	levidence			1 1
• included all other i	nformation listed in Question	on 8?				
11. Declaration - Trees				1	ı,	
l/we hereby apply for planni	ng permission/consent as o	lescribed in thi	s form and the acco	ompanying plans	drawings and addit	ional
information. I/we confirm the	at, to the best of my/our kn son(s) giving them.	owledge, any f	acts stated are true	and accurate and	any opinions giver	are the
Signed - Applicant:			Or signed - Agent:			\_
					1	
		<u></u>		<u></u>	<u> </u>	<u>-</u>
Date (DD/MM/YYYY):			•		. 4	
15/07/2015	This date must not be before sending or hand-delivery	of the form)	- <u>·</u>		ji L	
12. Applicant Contact	Details		13. Agent Cor	tact Details		1)
Telephone numbers :			Telephone numb	ers		F. 4
Country code: National no	umber	Extension number:		National number		Extension
				riacional france.		
Country code: Mobile nu	mber (optional):	1 n	Country code:	Mobile number (	optional):	
WIODISE NUI	inser (optional).				1	1
Country sode: 5			Country code:	Fax number (opti	onal):	
Country code: Fax number	er (optional):		Country code.	i ax number (opti	Onai).	
					1	
Email address (optional):		<u>i</u>	Email address (o	ptional):	1	
10			<b>(</b>			
Electronic communication -	If you submit this form by f	ax or e-mail th	e LPA may commu	nicate with you in	the same manner.	

\$Date: 2012-07-17 #\$ \$Revision: 4636 \$

(Please see guidance notes)