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

Hease 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.

lease complete using block capitals and black ink.

Applicant Name and Address

ou ()st 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).

t is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application , solice cannot proceed.

2. Agent Name and Address

· · · · · · · · · · · · · · · · · · ·	
itle: First name: Tracy = 1 any	Title: First name:
ast name: Gorpin + Jones	Last name:
ompany optional):	Company (optional):
Init: House suffix:	Unit: House number: House suffix:
louse ame:	House name:
ddress 1: Liver Lane	Address 1:
ddress 2: SEFTON PARK	Address 2:
ddress 3:	Address 3:
OWN: LIVERPOOL	Town:
county:	County:
Country: Erelars	Country:
ostcode: 4173BG	Postcode:

. Trees Location) 4. Trees Ownership			
all trees stand at the address shown in Question 1, go to Question . Otherwise, please provide the full address/location of the site /here the tree(s) stand (including full postcode where available)	Is the applicant the owner of the tree(s): Yes No If 'No' please provide the address of the owner (if known and if different from the trees location)			
	Title: First name:			
anit: House House suffix:	Last name:			
louse name:	Company (optional):			
Address 1:	Unit: House number: House suffix:			
Address 2:	House name:			
Address 3:	Address 1:			
Town:	Address 2:			
County:	Address 3:			
Postcode (if known):	Town:			
f the location is unclear or there is not a full postal address, either describe as clearly as possible where it is (for example, '£and to the	County:			
ear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or picture an Ordnance Survey grid reference:	Country:			
Description:	Postcode:			
	Telephone numbers Extension Country code: National number: number:			
	County cods Halloyd Halloyd Halloyd			
	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 below.			
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)				
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 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 your sketch plan (see guldance notes). Please provide the following information below: tree species (and it trees are protected by a TPO you must also provide reasons for the planting replacement trees (including quantity, species, position ar E.g. Oak (T3) - fell because of excessive shading and low amenity value	of the works you want to carry out. Continue on a separate steet in early for help with defining appropriate work. Where trees are edule to the TPO where this is available. Use the same numbers on the number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for and size) or reasons for not wanting to replant.			

7. Identification Of Tree(s) And Description Of Works continued		
		:
	<u></u>	
8. Trees - Additional Information		
Additional information may be attached to electronic communications or provided separat	ely in paper fo	ormat.
For all trees A sketch plan clearly showing the position of trees listed in Question 7 must be provided when as 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.	oplying for wor Larea (see guid	rks to trees covered Jance notes).
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 note	ving. If so, you s for further de	ır application etalis)
 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. 	┌ Yes	<u>¥</u> №
 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, vegetati and repair proposals. Also a report from an arboriculturist to support the tree wo	ion, monitorin ork proposals.	g data, soil, roots
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of a	damage and p	ossible solutions.
Documents and plans (for any tree) Are you providing separate information (e.g. an additional schedule of work for Question 7)?	≯ Yes	ſ [—] No
If YES, please provide the reference numbers of plans, documents, professional reports, photogr If they are being provided separately from this form, please detail how they are being submitted	()	
# 17 of treas a description of works to be	مل مساس لہ ں	en (Ag.1)
* 5: Le Plan (Ap.Z)		
* Photographs of Principle Trace (Ap. 3)		

With respect to the Authority, I am:					
			hese statements apply to you?		
(b) an elected member (d) related to an	elected member	Yes Yes	⊠ No		
If Yes, please provide details of the name, rela	tlonship and role	····			
10. Application For Tree Works - Che	ckilst				
Only one copy of the application form and add make sure that this form has been completed supply precise and detailed information may r but it may help you to submit a valid form.	correctly and that all releval	nt information is submitted	i. Please note that failure to		
Sketch Plan					
 A sketch plan showing the location o 	f all trees (see Question 8)		3		
For all trees					
(see Question 7)			G.		
Clear Identification of the trees concerns			X		
A full and clear specification of the w	orks to be carried out		⊠		
Fo. works to trees protected by a TPO (see Question 7)					
Have you:					
 stated reasons for the proposed worl 	cs?				
 provided evidence in support of the: if your reasons relate to the con appropriate expert 	stated reasons? in particular dition of the tree(s) - writter	: n evidenc e from an			
 if you are alleging subsidence d 		opriate engineer or survey	or 🗌		
and one from an arboricultu in respect of other structural da		dence	П		
•	_				
included all other information listed	in Question or				
11. Declaration - Trees I/we hereby apply for planning permission/corinformation. I/we confirm that, to the best of riger 'ne opinions of the person(s) giving them Signed - Applicant: Date (DD/MM/YYYY): (This date must no of sending or hand)	ny/our knowledge, any facts I-	rm and the accompanying stated are true and accura signed - Agent:	plans/drawings and additional ate and any opinions given are the		
12. Applicant Contact Details	112	. Agent Contact Deta	alls /		
Telephone numbers		tephone numbers			
Country code: National pumber:	Extension	ountry code: National nu	Extension number:		
Validital Indiana		, indiana			
Country code: Mobile number (optional):	——-	ountry code: Mobile nun	nber (optional):		
Country code: Fax number (optional):		ountry code: Fax numbe	r (optional):		
Email address (optional):		nali address (optional):	<u> </u>		
Electronic communication. If you submit this form by fax or e-mail the LPA may communicate with you in the same manner.					

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