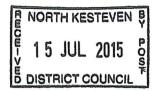


1. Application Name and Address





For office use only

Ref no: CA74/41

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.

Publication of planning applications on planning authority websites

Please note that with the exception of applicant contact details, the information provided on this application from and in supporting documents may be published on the authority's website. If you have provided any other information as part of your application which falls within the definition of personal data under the Data Protection Act which you do not wish to be published on the authority's website, 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.

		<b>欧洲农村的社会。基本对医院和国际科学者与设计对象的思想</b>					
Title: M&S	First Name: ∧	Surname: Davey					
Company (Optional):							
Unit:	House Number: SSA	House Suffix:					
House Name:							
Address 1: MAIN STREET							
Address 2: WILS FORD							
Address 3:							
Town: SLGAFORD	County:	Country:					
Postcode:							
2. Agent Name and Address							
Title:	First Name:	Surname:					
Company (Optional):	P& P FRENCH						
Unit:	House Number:	House Suffix:					
House Name: Fox HALL	BARN						
Address 1: ASGARBY							
Address 2:							
Address 3:							
Town: SLEAFRED	County:	Country:					
Postcode: NG211006							

1		P NORTH KESTEVEN B		
3. Trees Location		1 5 JUL 2015 8		
If all trees stand at the address si the full address/location of the sit	nown in Question 1, go to question e where the tree(s) stand (includin	n 4. Otherwise, piease provideng full postcode where available).		
Unit:	House Number:	House Suffix:		
House Name:				
Address 1:				
Address 2:				
Address 3:				
Town:	County:	Postcode (if known):		
If the location is unclear or there where it is (for example, 'Land to or provide an Ordnance Survey or	is not a full postal address, either the rear of 12 to 18 High Street' o grid reference:	describe as clearly as possible r 'Woodland adjoining Elm Road')		
4. Trees Ownership				
Is the applicant the owner of the If 'No' please provide the addres	tree(s): s of the owner (if known and if diff	Yes $\square$ No $\square$ erent from the trees location).		
Title:	First Name:	Last Name:		
Company (optional):	Unit:	House Number:		
House Suffix:	House Name:			
Address 1:				
Address 2:				
Address 3:				
Town:	County:	Country:		
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	?			
Are you seeking consent for wo	rks to tree(s) subject to a TPO?	Yes □ No 🗹		
Are you wishing to carry out wo	rks to tree(s) in a conservation are	ea? Yes ☑ No □		

## 6. Tree Preservation Order Details

If you know which TPO protects the tree(s), enter its title or number below:

P NORTH KESTEVEN B C 1 5 JUL 2015 S S DISTRICT COUNCIL

## 7. Identification of Tree(s) And Description Of Works

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on 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 you proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant. E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.

T1 Cherry

Fell to ground level small cherry near hand gate.

E NORTH KESTEVEN B
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).
<b>1. Condition of tree(s)</b> - e.g. it is diseased or you have fears that it might break or fall: Yes □ No □ If yes, you are required to provide written arboriculture advice or other diagnostic information from an appropriate expert.
2. Alleged damage to property - e.g. subsidence or damange to drains or drives. Yes □ No □ If yes, you are required to provide for: 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 aboriculturist 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 □ No □
If yes, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application. If they are being provided separately from this form, please detail how they are being submitted.

9. Application For Tree Works -	Checkiist			1, 10 10	1 ZUID 0		
Only one copy of the application form and additional information (Question 8) Exceptive College 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		ď					
For all trees (see Question 7) • Clear identification of the trees of A full and clear specification of the trees of the full and clear specification specification and clear specification specification specification and clear specification							
For works to trees protected by a TPO (see Question 8) Have you:							
<ul> <li>stated reasons for the proposed</li> </ul>	works?						
<ul> <li>provided evidence in support of the stated reasons? In particular:</li> <li>if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert</li> <li>if you are alleging subsidence damage - a report by an appropriate engineer or</li> </ul>							
surveyor and one from an arboriculturist.  • in respect of other structural damage - written technical evidence							
• included all other information listed in Question 8?							
10. Declaration - Trees							
I/we hereby apply for consent/give accompanying plans and addition			k as describe	d in this form and	I the		
Signed - Applicant: Or Signed - Agent:							
Date: 10 / 07 / 2	₽15 (This	date must	t not be before the	date of sending or har	nd-delivery of the form)		
11. Applicant Contact Details							
Country code:	National nur	nber:	231537	Extension Number	oer:		
Country code:	Mobile number (optional):						
Country code:	Fax number (optional):						
email address (optional):							
12. Agent Contact Details							
Country code:	National nur	mber:	01526 462120	Extension Numl	oer:		
Country code:	Mobile number (optional):						
Country code:	Fax number (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)

email address (optional):

## Site Plan for 55a Main Street, Wilsford



