

PLANNING DEPARTMENT 2 8 SEP 2017 RECEIVED

Planning Developm

Welwyn Hatfield The Campus, Welwyn Garden City

Telephone: \ Email: planning@v Website: www.well

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:	Mr First name: Glen	Title:	First name: Pocm	
Last name:	Mording	Last name:	Prie	
Company (optional):	Gascoyne Holdings 40	Company (optional):	Arborcore	
Unit:	House number: House suffix:	Unit:	N House number: House suffix:	
House name:	Estate Office	House name:	Shongri-La farm	
Address 1:	The Melon Ground	Address 1:	Vodds Graen	
Address 2:	Hotfield Pork	Address 2:		
Address 3:		Address 3:		
Town:	Hatfield	Town:	Stevenage	
County:	Herts.	County:	Nets	
Country:		Country:		
Postcode:	AL9 ENB	Postcode:	SCIZJE	

3. Trees Location	4. Trees Owi			
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)	owner (if known and if different from the trees location)			
Unit: House House suffix:	Title:	First name:		
House name: Hill House	Company (optional):			
Address 1: Park Street	Unit:	House number:	House suffix:	
Address 2:	House name:	number.		
Address 3:	Address 1:			
Town: Hatfield	Address 2:			
County: Nert's	Address 3:			
Postcode (if known): FX9 5AZ	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 rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or provide an Ordnance Survey grid reference:	County:  Country:  Postcode:			
Description:	Telephone nui	mbers	Extension	
	Country code:		number:	
	Country code:	Mobile number (optiona	al):	
	Country code.	Mobile Hamber (options	3).	
	Country code:	Fax number (optional):		
	Email address	(optional):		
	Email address	(орнопан.		
5. What Are You Applying For?	6. Tree Pre	servation Order Deta	ils	
3. What Are Toursphying 1 s.	If you know w	hich TPO protects the tree(s		
Are you seeking consent for works to tree(s) Yes No subject to a TPO?	below.			
Are you wishing to carry out works to tree(s) I Yes No in a conservation area?				
7. Identification Of Tree(s) And Description Of Work Please identify the tree(s) and provide a full and clear specification necessary. You might find it useful to contact an arborist (tree surg protected by a TPO, please number them as shown in the First Sch your sketch plan (see guidance notes). Please provide the following information below: tree species (and trees are protected by a TPO you must also provide reasons for the planting replacement trees (including quantity, species, position a E.g. Oak (T3) - fell because of excessive shading and low amenity value	geon) for help with geon) for help with nedule to the TPO with the number used e work and, where and size) or reasons te. Replant with 1 st	where this is available. Use to on the sketch plan) and de trees are being felled, pleas s for not wanting to replant andard ash in the same place	the same numbers on scription of works. Where se give your proposals for e.	
TI Cherry - fell to grain recording on yeu tree would be	ound Le	vel. This	tree is	
yeu tree would be	neat a	fon the roc	, ,	

. Trees - Additional Information			
dditional information may be attached to electronic communications or provided separat	ely in naner i	format	
aditional information may be attached to electronic communications of provided separa-	tery in paper i	ormat.	
or all trees sketch plan clearly showing the position of trees listed in Question 7 must be provided when a y a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation			ed
would also be helpful if you provided details of any advice given on site by an LPA officer.			
or works to trees covered by a TPO lease indicate whether the reasons for carrying out the proposed works include any of the follow nust be accompanied by the necessary evidence to support your proposals. (See guidance note			
<ol> <li>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.     </li> </ol>	┌ Yes	┌ No	
<ol> <li>Alleged damage to property - e.g. subsidence or damage to drains or drives.</li> <li>If YES, you are required to provide for:</li> </ol>	┌ Yes	┌ No	
Subsidence A report by an engineer or surveyor, to include a description of damage, vegetati	on monitoring	r data soil roots	
and repair proposals. Also a report from an arboriculturist to support the tree wo		g data, son, roots	
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of c	lamage and po	ossible solutions.	
ocuments and plans (for any tree) re you providing separate information (e.g. an additional schedule of work for Question 7)?	☐ Yes	┌ No	
re you providing separate information (e.g. arradational schedule of work for Question 7).	1 163	j No	
YES, please provide the reference numbers of plans, documents, professional reports, photograthey are being provided separately from this form, please detail how they are being submitted.		port of your applic	cation.

9. Authority Employee / Member	
With respect to the Authority, I am: (a) a member of staff (c) related to a member of staff	Do any of these statements apply, to you?
(b) an elected member (d) related to a member of staff (d) related to an elected member	Yes No
	_ ies ino
If Yes, please provide details of the name, relationship and role	
	1 and the Lorentz and the Lore
10. Application For Tree Works - Checklist	
Only one copy of the application form and additional information (Question) make sure that this form has been completed correctly and that all relevant in supply precise and detailed information may result in your application being but it may help you to submit a valid form.	nformation is submitted. Please note that failure to
Sketch Plan	/
<ul> <li>A sketch plan showing the location of all trees (see Question 8)</li> </ul>	
For all trees	
(see Question 7)	
<ul> <li>Clear identification of the trees concerned</li> </ul>	n h
<ul> <li>A full and clear specification of the works to be carried out</li> </ul>	W.
For works to trees protected by a TPO (see Question 7)	
Have you:	
<ul><li>stated reasons for the proposed works?</li></ul>	
<ul> <li>provided evidence in support of the stated reasons? in particular:</li> </ul>	
<ul> <li>if your reasons relate to the condition of the tree(s) - written ev</li> </ul>	idence from an
<ul> <li>appropriate expert</li> <li>if you are alleging subsidence damage - a report by an appropriate</li> </ul>	riate engineer or surveyor
and one from an arboriculturist.	
<ul> <li>in respect of other structural damage - written technical evider</li> </ul>	nce
<ul><li>included all other information listed in Question 8?</li></ul>	
	And the second s
11. Declaration - Trees  I/we hereby apply for consent/give notice for tree work as described in this fo  Signed - Applicant:  Or sign  Date (DD/MM/YYYY):  (This date must not be before the date of sending or hand-delivery of the form)	rm and the accompanying plans and additional information. ed - Agent:
	16 1 15 1 1
	gent Contact Details
Telephone numbers Extension	hone numbers Extension
	try code: National number: number:
Country code: Mobile number (optional): Count	try code: Mobile number (optional):
Country code: Fax number (optional): Country	try code: Fax number (optional):
Email address (optional):	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)



