



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

## **Privacy Notice**

This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

## **Local Planning Authority details:**



Proud of our past. Energised for our future.

## Copeland Borough Council

The Copeland Centre, Catherine Street, Whitehaven, Cumbria CA28 7SJ tel: 0845 054 8600

fax: 01946 59 83 03

email: info@copeland.gov.uk web: www.copeland.gov.uk

## Publication of applications on planning authority websites

Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

| 1. Applicant Name and Address |                     |  |  |  |
|-------------------------------|---------------------|--|--|--|
| Title:                        | Mr First name:      | James  |  |  |
| Last name:                    | Paton               | yet being odness 17 to py our                                |  |  |
| Company (optional):           |                     |  |  |  |
| Unit:                         | House number:       | House suffix:  |  |  |
| House name:                   | Georgian house      |  |  |  |
| Address 1:                    | Egremont road       | ar yers at moves y assets<br>Seattle area/algueix meg pl     |  |  |
| Address 2:                    |                     |  |  |  |
| Address 3:                    | Cury Rightson, News | guizat ese major prinche ajuni<br>ministras del acestrono de |  |  |
| Town:                         | Whitehaven          |  |  |  |
| County:                       | Cumbria             | nutrico d'inferir coire                                      |  |  |
| Country:                      |                     |  |  |  |
| Postcode:                     | Ca28 8QB            |  |  |  |

| 2. Agent I          | Name and Address           |  |
|---------------------|----------------------------|--|
| Title:              | Mr First name:             | Gavin  |
| Last name:          | Benson                     | r Silverson, pro-Miller (nov. m/A                    |
| Company (optional): |                            |  |
| Unit:               | House 62 number:           | House suffix:  |
| House name:         | na hyrona O a silvina a sa | Ti Cinelescaline (I.)                                |
| Address 1:          | Herdus road mirehouse      | h jend sili vinoni kasalik<br>sou Grouti o vinosilik |
| Address 2:          | 194(0) (5) (8)             | op wo mb pslaje wy                                   |
| Address 3:          | PC                         |  |
| Town:               | Whitehaven                 |  |
| County:             | Cumbria                    | n One in Letter Medicine                             |
| Country:            |                            |  |
| Postcode:           | CA288BX                    |  |
|                     | Version 2                  |  |

| 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)  Unit:  | se                    |
|--|-----------------------|
| Unit: House number: Brouse suffix: Last name: Company (optional): Unit: House number: Suffix House (optional): Unit: House number: Suffix House number: Suff |                       |
| name: Address 1: Address 2: Address 3: Town: County: Postcode (if known): 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:  Description:  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:  Description:  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:  Description:  Town:  County:  County:  County:  County:  Telephone numbers  |                       |
| Address 1:  Address 2:  Address 3:  Town:  County:  Postcode (if known):  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:  Description:  Unit: House name:  Address 1:  Address 2:  County:  County:  County:  Postcode:  Telephone numbers  |                       |
| Address 2:  Address 3:  Town:  County:  Postcode (if known):  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:  Description:  House name:  Address 1:  Address 2:  County:  County:  County:  Country:  Postcode:  Telephone numbers  |                       |
| Address 3:  Town:  County:  Postcode (if known):  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:  Description:  Address 1:  Address 3:  Town:  County:  County:  Country:  Postcode:  Telephone numbers   |                       |
| Town:  County:  Postcode (if known):  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:  Description:  Address 2:  Address 3:  Town:  County:  County:  Postcode:  Telephone numbers   |                       |
| County:  Postcode (if known):  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:  Description:  Address 3:  Town:  County:  Country:  Postcode:  Telephone numbers   |                       |
| Postcode (if known):  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:  Description:  Town:  County:  Country:  Postcode:  Telephone numbers  |                       |
| 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:  Description:  County:  Country:  Postcode:  Telephone numbers   |                       |
| 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:  Description:  Country:  Postcode:  Telephone numbers   |                       |
| provide an Ordnance Survey grid reference:  Description:  Postcode:  Telephone numbers   |                       |
| Telephone numbers  |                       |
|  |                       |
|  | Extension number:     |
|  |                       |
| Country code: Mobile number (optional):  |                       |
| Country code: Fax number (optional):   |                       |
|  |                       |
| Email address (optional):  |                       |
|  |                       |
| 5. What Are You Applying For?  6. Tree Preservation Order Details  |                       |
| Are you seeking consent for works to tree(s) Yes No If you know which TPO protects the tree(s), enter its title below.   | e or number           |
| 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 the works you want to carry out. Continue on a separate necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees a protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same num 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 wo trees are protected by a TPO you must also provide reasons for the work and, where trees are being felled, please give your preplanting 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.   | hers on<br>rks. Where |
| Sycamore T1,take down because tree is dying at the top and is very unhealthy at the bottom. Dead branches are overhand driveway and main access to the house if the tree came over in high winds it could hit the house or garage.   | ging the              |

| , produce a produce de la companya de la companya<br>Indicada de la companya de la compa  | and the second s |
|--|--|
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| Trees - Additional Information   |  |
| ditional information may be attached to electronic communications or provid  | led separately in paper format.  |
| r all trees<br>sketch plan clearly showing the position of trees listed in Question 7 must be provid<br>a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a co<br>would also be helpful if you provided details of any advice given on site by an LPA of  | conservation area (see guidance notes).  |
| r works to trees covered by a TPO ease indicate whether the reasons for carrying out the proposed works include any east be accompanied by the necessary evidence to support your proposals. (See gui  |  |
| <ol> <li>Condition of the tree(s) - e.g. it is diseased or you have fears that it might brea If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.</li> </ol>  |  |
| Alleged damage to property - e.g. subsidence or damage to drains or drives.     If YES, you are required to provide for:         Subsidence  | Yes No   |
| A report by an engineer or surveyor, to include a description of damage 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 descretements and plans (for any tree)   | ription of damage and possible solutions.  |
| you providing separate information (e.g. an additional schedule of work for Questic  | on 7)? Yes No  |
| YES, please provide the reference numbers of plans, documents, professional report<br>hey are being provided separately from this form, please detail how they are being   |  |
| morning the second seco | spiritoryn trycol (44 - 1600) gwite  |
|  |  |
|  |  |
|  |  |
| distributed standard season in the   | superior commented with relati   |
| Authority Employee / Member an important principle of decision-making that the process is open and transparent ans related, by birth or otherwise, closely enough that a fair-minded and informed o clude that there was bias on the part of the decision-maker in the local planning au   | observer, having considered the facts, would   |
| any of the following statements apply to you and/or agent? Yes X No  | 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   |
| es, please provide details of their name, role and how you are related to them.  |  |
|  |  |

| 10. Application For Tree Works - Checklist  |   | 0                        |
|---|---|--------------------------|
| Only one copy of the application form and additional information (Qu 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. Please note that failu  | ire to                   |
| Sketch Plan   |   |                          |
| A sketch plan showing the location of all trees (see Question)  | n 8)  |                          |
| For all trees (see Question 7)  |   |                          |
| Clear identification of the trees concerned   |   |                          |
| <ul> <li>A full and clear specification of the works to be carried out</li> </ul>   |   |                          |
| 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 parti</li> <li>if your reasons relate to the condition of the tree(s) - was appropriate expert</li> </ul>   |   |                          |
| <ul> <li>if you are alleging subsidence damage - a report by ar</li> </ul>  | n appropriate engineer or surveyor  |                          |
| <ul><li>and one from an arboriculturist.</li><li>in respect of other structural damage - written technic</li></ul>  | al evidence   |                          |
| <ul> <li>included all other information listed in Question 8?</li> </ul>  |   |                          |
| 11. Declaration - Trees  I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any figenuine opinions of the person(s) giving them.  Signed - Applicant:  Date (DD/MM/YYYY):  28/9/2020  (This date must not be before the date of sending or hand-delivery of the form) | his form and the accompanying plans/drawings and acfacts stated are true and accurate and any opinions gi | dditional<br>ven are the |
| 12. Applicant Contact Details   | 13. Agent Contact Details   |                          |
| Telephone numbers  Extension  | Telephone numbers   | Extension                |
| Country code: National number: number:  | Country code: National number:  | number:                  |
| Country code: Mobile number (optional):   | Country code: Mobile number (optional):   |                          |
| Country code: Fax number (optional):  | Country code: Fax number (optional):  |                          |
| Email address (optional):   | Email 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)