



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

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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:



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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.

Applicant Name and Address				
Title:	MR	First name:	MA	RC
Last name:	JF	ackson		
Company (optional):				
Unit:		House number:		House suffix:
House name:	_			
Address 1:				
Address 2:				
Address 3:				
Town:	_			
County:				
Country:				
Postcode:				

2. Agent Name and Address				
Title:	First name:			
Last name:				
Company (optional):				
Unit:	House number: House suffix:			
House name:				
Address 1:				
Address 2:				
Address 3:				
Town:				
County:				
Country:				
Postcode:	Version 2019 1			

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	Title: First name:				
House Sullix:	Last name: Company				
name: Address 1: PLOT 5	(optional):				
Address 2: RHEDA PARK	Unit: House rouse suffix:				
Address 3: FRIZINGTON	name:				
Town:	Address 1:				
County:	Address 2: Address 3:				
Postcode (if known): CA26 3AB	Town:				
If the location is unclear or there is not a full postal address, either	County:				
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	Country:				
provide an Ordnance Survey grid reference:	Postcode:				
Description:	Telephone numbers Extension				
	Country code: National number: 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 subject to a TPO?	If you know which TPO protects the tree(s), enter its title or number below.				
Are you wishing to carry out works to tree(s) Yes No	8.03 (Mahure Elm)				
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 your 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.					
The tree currenty has a TPO, but when a tree surgeon has					
been out to look, he has confirmed that the tree inquestion					
stands dead, leaning over a busy road-This is very dancegous. We have requested that the tree surgion provides us with a report. We have also attached phonos of the tree for your to his hours are like wish to remove the tree					
11 0 00/4 1/10 0	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				

T LIVE CONT. () A ID. C. C. OSW. I. C.				
7. Identification Of Tree(s) And Description Of Works continued				
. We have also attached the TPO report Cimage of the plot) and Circled the tree in question (circled red)				
and avoid the mee myaestian e avoid real				
we would like to remove this sconer rather than later, whilst				
the plot of land is employ to fell the tree in a safe environment. (NO obstructions/machines/worker or boild)				
environment. (NO obstructions/machines/worker or boild)				
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)				
1. 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.				
2. Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES, you are required to provide for: (NOTHIGH WE OVE OWOVE) Yes No				
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 arboriculturist 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. Authority Employee / Member				
It is an important principle of decision-making that the process is open and transparent. For the purposes of this question, "relating to" means related, by birth or otherwise, closely enough that a fair-minded and informed observer, having considered the facts, would conclude that there was bias on the part of the decision-maker in the local planning authority.				
Do any of the following statements apply to you and/or agent? Yes 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				
If Yes, please provide details of their name, role and how you are related to them.				

10. Application For Tree Works - Checklist					
Only one copy of the application form and additional information (Quake 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 failure to				
Sketch Plan					
 A sketch plan showing the location of all trees (see Question 	18)				
For all trees (see Question 7)					
 Clear identification of the trees concerned A full and clear specification of the works to be carried out 					
For works to trees protected by a TPO (see Question 7)					
Have you:					
stated reasons for the proposed works?	\square				
 provided evidence in support of the stated reasons? in parti if your reasons relate to the condition of the tree(s) - we 					
appropriate expertif you are alleging subsidence damage - a report by an	appropriate engineer or surveyor				
 and one from an arboriculturist. in respect of other structural damage - written technical 	al evidence				
 included all other information listed in Question 8? 					
11. Declaration - Trees /we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional information. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the person(s) giving them. Signed - Applicant: Or signed - Agent:					
Date (DD/MM/YYYY):					
5-5-21 (This date must not be before the date of sending or hand-delivery of the form)					
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: 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)