

Planning Service
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Application for tree works: works to trees subject to a preservation order (TPO)
and/or notification of proposed works to trees in conservation areas (CA).

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.

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

1. Applicant Name and Address

Title:	M-	First name:	ANTHONY
Last name:	MARRIOTT		
Company (optional):	OVERTON MEDICAL PRACTICE		
Unit:		House number:	
House name:	OVERTON MEDICAL PRACTICE		
Address 1:	15 HIGH STREET		
Address 2:			
Address 3:			
Town:	OVERTON		
County:	WREXHAM		
Country:			
Postcode:	LL13 9ED		

2. Agent Name and Address

Title:		First name:	
Last name:			
Company (optional):			
Unit:		House number:	
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

3. Trees Location

Full address/location of the site where the tree(s) stand (including full postcode where available)

Unit:		House number:		House suffix:	
House name:	OVERTON MEDICAL PRACTICE				
Address 1:	15 HIGH STREET				
Address 2:					
Address 3:					
Town:	OVERTON				
County:	WREXHAM				
Postcode (if known):	LL13 0ED				

If there is not a full postal address, describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Main Road') or provide a grid reference:

Easting:	
Northing:	

Description:

GROUNDS ADJOINING STABLE YARD HOMES ON SOUTH SIDE OF PREMISES. TREES ARE INFRINGING ON OUR NEIGHBOUR LIGHT & BOUNDARIES.

4. Trees Ownership

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:	
Last name:			
Company (optional):			
Unit:		House number:	
House name:			
Address 1:			
Address 2:			
Address 3:			
Town:			
County:			
Country:			
Postcode:			

Telephone numbers

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 wishing to carry out works to tree(s) in a Conservation Area (CA)? ☒ Yes ☐ No

Are you seeking consent for works to tree(s) Subject to a Tree Preservation Order (TPO)? ☐ Yes ☒ No

6. Tree Preservation Order Details

Do you know the title of the Tree Preservation Order (TPO)? ☐ Yes ☐ No

If Yes, please provide the title of the TPO:

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

Before answering these questions you might find it helpful to consult a tree surgeon to clarify what needs to be done.

Please provide a full and clear description of:

- The proposed works
- The trees affected including species and location

TO REMOVE ONE DOUGLAS FIR CONSIDERED INAPPROPRIATE SPECIES IN THIS LOCATION. TO REPLACE WITH SMALLER SPECIES GUIDED BY ARBORIST. TO TRIM BY ONE THIRD OF GROWTH. TWO SILVER BIRCH, TWO FALSE ACACIA & TWO VARIEGATED HOLLY.

Trees protected by TPO should be numbered according to the First Schedule of the Tree Preservation Order. For example - T3 oak; two beech and one birch in G2.

You must identify the trees on a sketch plan showing the location in relation to building(s), named roads and boundaries.

Please state the reference number you have given the plan (as described above):

8. Trees - Reasons For Works

This section only needs to be completed if you are seeking consent for proposed works to trees under a Tree Preservation Order (TPO)

Please state the reasons for carrying out the proposed works on the tree(s):

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 documents specified.

Health or safety of the tree(s) - e.g. it is diseased, fears that it might break or fall:

☐ Yes

☒ No

If Yes, information required - report by a tree professional (e.g. arboriculturist, horticultural adviser).

Alleged subsidence damage:

☐ Yes

☒ No

If Yes, Information required: Full report by an engineer or surveyor, together with one from a tree professional - to include date and description of property damage; sub-soil type and shrinkage potential; location of any roots found and their identification; history of ground and building movement through a distortion survey and/or level or crack monitoring over suitable period; other vegetation in the vicinity and its management since discovery of the damage.

9. Trees - Additional Information

Are you providing additional information in support of your application?

☐ Yes

☒ No

If Yes, please provide the reference numbers of plans, documents, professional reports etc in support of your application:

10. Application For Tree Works - Checklist

Please use this checklist to ensure that the form has been completed correctly and that all relevant information is submitted.

For works to trees protected by a Tree Preservation Order, failure to supply sufficiently precise and detailed information may result in your application being rejected or delay in dealing with it. In particular, you MUST provide the following:

The original and 3 copies of a completed and dated application form. ☐

The original and 3 copies of a sketch plan showing the location of all tree(s). ☐

The original and 3 copies of a full and clear specification of the works to be carried out. ☐

The original and 3 copies of a statement of reasons for the proposed work. ☐

- evidence in support of statement of reasons. In particular, you should provide:

The original and 3 copies of a report by a tree professional (e.g. arboriculturist or horticultural adviser) if your reasons relate to the health and/or safety of the tree(s). ☐

The original and 3 copies of a report by an engineer or surveyor, together with one from a tree professional (arboriculturist) if you are alleging subsidence damage. ☐

For works to trees in conservation areas, it is important to supply precise and detailed information on your proposal. You may, therefore, wish to provide the following:

The original and 3 copies of a completed and dated form, with all questions answered. ☒

The original and 3 copies of a sketch plan showing the precise location of all tree(s). ☐

The original and 3 copies of a full and clear specification of the works to be carried out. ☐

Whether the trees are protected by a TPO or in a conservation area, please indicate which of the following types of additional information you are submitting (the original and 3 copies of each need to be provided):

- photographs. ☒

- report by a tree professional (arboriculturist) or other. ☐

- details of any assistance or advice sought from a Local Planning Authority officer prior to submitting this form. ☐

11. Declaration - Trees

I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional information. I confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of the persons giving them.

Signed - Applicant:

ACM

Or signed - Agent:

Date (DD/MM/YYYY):

24/11/2024 (date cannot be pre-application)

12. Applicant Contact Details

Telephone numbers

Country code: National number: Extension number:

01978 777 005

Country code: Mobile number (optional):

Country code: Fax number (optional):

01978 777 494

Email address (optional):

tony.marriott@vailes.nhs.uk

13. Agent Contact Details

Telephone numbers

Country code: National number: Extension number:

Country code: Mobile number (optional):

Country code: Fax number (optional):

Email address (optional):