

North York Moors National Park Authority The Old Vicarag

Telephone: 01439 772700 Email: planning@northyorkmoors.org.uk Website: www.northyorkmoors.org.uk

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

ublication of applications on planning authority websites

lease complete using block capitals and black ink.

otice of works to trees in a conservation area).

otice cannot proceed.

Sease 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.

ou 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

is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application /

| I. Applicant Name and Address | | | | |
|-------------------------------|-----------------------------|--|--|--|
| Title: | MIK First name: ANDREW | | | |
| Last name: | STEVENSON | | | |
| Company (optional): | NA | | | |
| Unit: | House number: House suffix: | | | |
| House name: | SUNNYBANK BARN | | | |
| Address 1: | BROXA LANE | | | |
| Address 2: | HACKNESS | | | |
| Address3: | | | | |
| Town: | NEAR SCARBOROUGH | | | |
| County: | NORTH YORKSHILL | | | |
| Country: | ENGLAND | | | |
| Postcode: | Y0 13 0 JW | | | |

| 2. Agent Name and Address | | | | |
|---------------------------|--------------------------------|--|--|--|
| Title: | MA First name: PAUL | | | |
| | CLAYTON | | | |
| Company (optional): | CLAYTONS ULTIMATE TERE CARE | | | |
| Unit: | House number: 92 House suffix: | | | |
| House name: | JOSSEY LANE | | | |
| Address 1: | : SCAWTHORPE | | | |
| Address 2: | | | | |
| Address 3: | | | | |
| Town: | DONCASTER | | | |
| County: | SOUTH YORKSHIRE | | | |
| Country: | ENGLAND | | | |
| Postcode: | DN59DJ | | | |

| o. Irees! | Location | 4. Trees Ownership | | | | |
|---------------------|--|--|--|--|--|--|
| EIM DITTO | tand at the address shown in Question 1, go to Question te, please provide the full address/location of the site | Is the applicant the owner of the tree(s): | | | | |
| wherethet | tree(s) stand (including full postcode where available) | Title: First name: | | | | |
| Unit: | House House suffix: | Last name: | | | | |
| House | SUNNYBANK BARN | Ompany | | | | |
| name: Address 1: | | (optional): House House suffix: | | | | |
| | BICCOCA CTIVE | House | | | | |
| Address 2: | TIACTON | name: Address 1: | | | | |
| Address 3: | | | | | | |
| Town: | NEAR SCARBOLOUGH | Address2 | | | | |
| County: | NORTH YORKSHILL | Address3: | | | | |
| (if known): | Y0130JW | Town: | | | | |
| If the locati | tion is unclear or there is not a full postal address, either | County: | | | | |
| | to 10 High Street Of Wooding to the | Country: | | | | |
| provide ar | n Ordnance Survey gnd releases | Postcode: | | | | |
| Descriptio | (T) REQUIRES | Telephone numbers Country code: National number: | | | | |
| TREE | (/)/icas-c- | | | | | |
| 1000 | | Country code: Mobile number (optional): | | | | |
| | | har footions(): | | | | |
| | | Country code: Fax number (optional): | | | | |
| 1 3900 | | Email address (optional): | | | | |
| I Was | | | | | | |
| 1000 | | 6. Tree Preservation Order Details | | | | |
| 5. What | Are You Applying For? | If you know which TPO protects the tree(s), enter its title or number | | | | |
| THE REAL PROPERTY. | | | | | | |
| Are you so | selking consent for works to tree(s) Ves No | PROVISIONALLY AN ENCHERULY T. P. a) TPO NUMBER 2012/2 | | | | |
| subject to | ishing to carry out works to tree(s) Thes No | TPO Number 2012/2 | | | | |
| Are you wi | vation area? | | | | | |
| 100000 | · ··· Of Works | of the works you want to carry out. Continue on a separate sheet if son) for help with defining appropriate work. Where trees are adule to the TPO where this is available. Use the same numbers on | | | | |
| 7. Identif | rify the tree(s) and provide a full and clear specification of | of the works you want to carry out. Continue on a separate sheet in of the works you want to carry out. Continue on a separate sheet in of the works you want to carry out. Continue on a separate sheet in of the works where some out to the same numbers on a separate sheet in out to the same numbers of the same n | | | | |
| necessary. | too mag them as shown in the mach | | | | | |
| protected | to (especial dance notes). | the number used on the sketch planty and description proposals for | | | | |
| Please prov | ride the following must also provide reasons for the votected by a TPO you must also p | the number used on the sketch plan) and description of works. Where work and, where trees are being felled, please give your proposals for d size) or reasons for not wanting to replant. Peplant with 1 standard ash in the same place. | | | | |
| planting rep | La because of excessive shading and ion | to be promittee (CAOWA CLEANING AND REAL | | | | |
| Eq. Oak(15) | The work to ac under thice | TREA PRESELVATION OUTSE. | | | | |
| AS YOU DEAD | OWOOD OF THE TWO STEEN WITH ONE | OF THE MAIN BRANCHES ON PROME THE FULL | | | | |
| purino | PLANTING TOP LEAD BRANCH WITH SIGNIFICANT DELAY AND THEREST AND REAL BRANCHES ON THE BRANCH WITH SIGNIFICANT DELAY AND THE BRANCH WITH SIGNIFICANT DELAY AND THERE SHE FROM THE BRANCH WITH SIGNIFICANT CAULTY WHICH EXTENDS A SIGNIFICANT CAULTY WHICH EXTENDS A SIGNIFICANT DELAY AND LOSS OF HEALT WOW. THIS BRANCH WITH SIGNIFICANT DELAY AND LOSS OF HEALT WOW. THIS BRANCH WITH SIGNIFICANT DELAY AND LOSS OF HEALT WOW. A SIGNIFICANT DELAY AND THERE IS A SIGNIFICANT DELAY AND THERE IS ILLEGENTS A SIGNIFICANT DELAY AND THERE IS ILLEGENTS A SIGNIFICANT DELAY AND THERE IS IN THE BRANCH WITH SIGNIFICANT DELAY AND THERE IS IN PORPULSED. | | | | | |
| IDENTI | OF THE BRANCH WITH SIGNIFICATION | THE DAYER TO PEDESTRIANS AND ROSDUSERS | | | | |
| LENGH | SES THE PAULUE AND THEMESE POTEN | \$0ate: 2014-02-10 #\$ \$Pinksion: 5975-\$ | | | | |
| POSSIBIL | 177 01-1-1 | | | | | |

| THE TREE SUREEON HAS RECOMMENDED THE FOLLOWING | | |
|--|----------------|-------------------------|
| THE PRIMARY BRADEH, (TREED) PLEASE SEE ATTACHED RESONS AND ASSOCIATE PLEASE ALSO REFRE TO THE OPICHNAL ARBORICU SHOWITTED BY LAWSON HARPER AMENDED 18/5/15 | IL EROS | DEMARKS. |
| | | |
| 3. Trees-Additional Information | | Jan 2 1947 - |
| sketch plan clearly showing the position of treeslisted in Question 7 must be provided when apply a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation at 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 Rease indicate whether the reasons for carrying out the proposed works include any of the following the accompanied by the necessary evidence to support your proposals. (See guidance notes the proposals of the proposals of the proposals of the proposals of the proposals.) | ng. If so, you | r application tails) |
| 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. | | |
| Alleged damage to property - e.g. subsidence or damage to drains or drives. If YES you are required to provide for: | ┌ Yes | rtro |
| A report by an engineer or surveyor, to include a description of damage, vegetation and repair proposals. Also a report from an arboriculturist to support the tree work. Other structural damage (e.g. pfrains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of dates. | proposiis | |
| | Thes | □ No |
| ocuments and plans (for any tree) re you providing separate information (e.g. an additional schedule of work for Question 7)? | 10 | |
| re you providing separate information (e.g. an additional schedule of work for Cuestion 7)? YES please provide the reference numbers of plans, documents, professional reports, photographic they are being provided separately from this form, please detail how they are being submitted. | hsetc in sup | |
| re you providing separate information (e.g. an additional achedule of work for Question 7)? | hsetc in sup | |

| 9. Authority Employee / Member With respect to the Authority, I am: (a) a member of staff (b) an elected member (d) related to a member of staff (b) an elected member (d) related to an elected member If Yes, please provide details of the name, relationship and role N/A 10. Application For Tree Works - Checklist Only one copy of the application form and additional information (C make sure that this form has been completed correctly and that all r supply precise and detailed information may result in your application. | | | | |
|--|--|--|--|--|
| but it may help you to submit a valid form. Sketch Plan Asketch plan showing the location of all trees (see Question) | n8) | | | |
| For all trees (see Question 7) • Gear identification of the treesconcerned • A full and clear specification of the works to be carried out | | | | |
| For worksto treesprotected by a TPO (see Question 7) Have you: | | | | |
| stated reasons for the proposed works? provided evidence in support of the stated reasons?in part if your reasons relate to the condition of the tree(s) - wappropriate expert if you are alleging subsidence damage - a report by an and one from an arboriculturist. in respect of other structural damage - written technic included all other information listed in Question 8? | n appropriate engineer or surveyor | | | |
| 11. Declaration - Trees If we hereby apply for planning permission/consent as described in the information. If we confirm that, to the best of my/our knowledge, any genuine opinions of the person(s) giving them. Signed - Applicant: Date (DD/MM/YYYY): (This date must not be before the date of sending or hand-defivery of the form) | of facts stated are true and accurate and any opinions given are the | | | |
| Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | Telephone numbers Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Email address (optional): | | | |

(Please see guidance notes)