

Form Submission PDF

Application for works to trees subject to a tree preservation order (TPO) and/or notification of proposed works to trees in a conservation site.

Your Data

REFERENCENUMBER	2796-2865-8870-0302
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Applicant Details

Your Details	
Applicant Details	
First name	Michael
Last name	Tanner
Phone number	
Email address	
Confirm email address	
Address	THE OFFICE TURNERS HILL PARK NIGHTINGALE LANE TURNERS HILL WEST SUSSEX RH10 4QS

Agent Details

Agent Details	
Agent Details	
Name	Simon
Last Name	Payne
Company	Turners Hill Tree Surgeons
Address	4 Heath Square Boltro Road Haywards Heath West Sussex RH16 1BL
Phone number	
Email address	

Tree Location

Tree Location	
Do all trees stand at the applicant address?	Yes
Full address/location of the site where the tree(s) stand	

Location Description	
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Ownership of Trees

Label	
Is the applicant the owner of the trees?	Yes
Owner Details	
First name	
Last name	
Phone number	
Email address	
Address	

TPO Details

Further Details	
Are you seeking consent for works to tree(s) subject to TPO	Yes
Are you wishing to carry out works to tree(s) in a conservation area?	No
If you know which TPO protects the tree(s), enter its title or number	
Please identify the tree(s) and provide a full and clear specification of the works you want to carry out	Application is being made in relation to the parks annual tree health survey carried out by Aspect Tree Consultancy. Please refer to the attached "tree survey & quantified tree risk assessment". Multiple tree's noted for works to be carried out due to safety concerns.

Additional Information

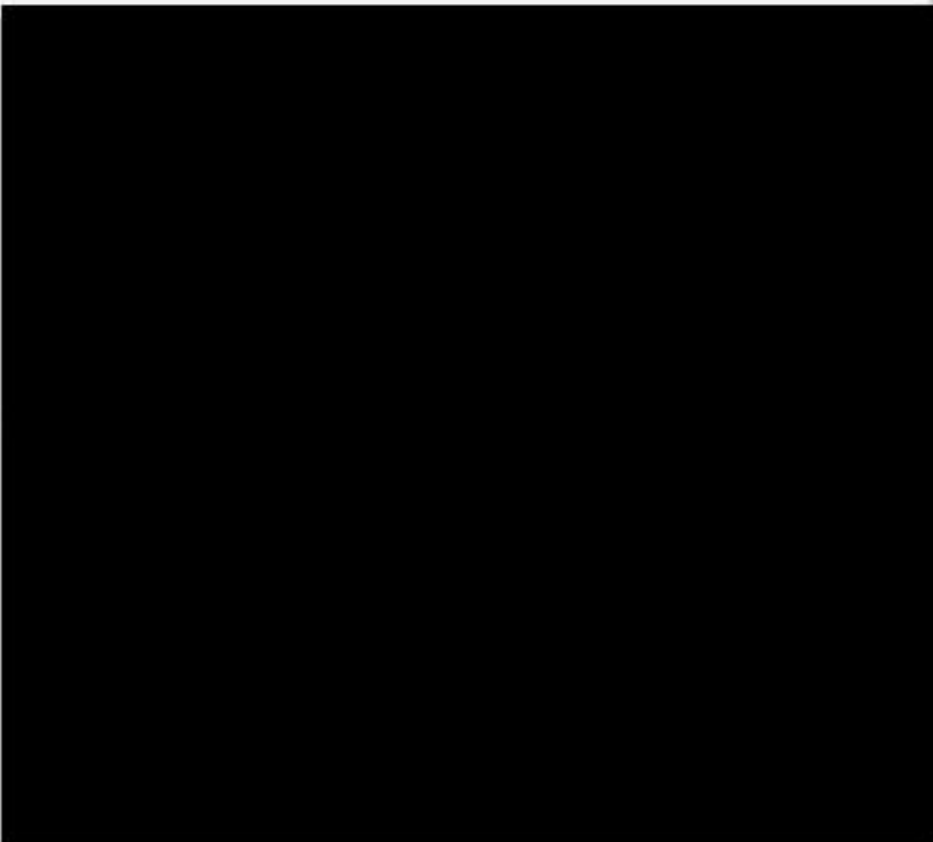
ADDITIONALINFORMATION	
For all trees	
Sketch plan clearly showing the position of trees listed in the previous question	Aspect tree map.pdf [REDACTED]
For works to trees covered by TPO	
Please provide a reason why you wish to perform these works	As per the parks annual tree health survey & risk assessment (attached).
Condition of the trees(s)	Yes
Advice/Diagnostics	Aspect survey 2025.pdf [REDACTED]
Alleged damage to property	No
Report/Evidence	
Are you providing separate information?	No
Please provide the reference numbers of plans, documents,	

professional reports, photographs etc in support of your application.

Authority/Employee

Label	
With respect to the Authority, I am	a member of staff
Please provide details of the name, relationship and role	Berkeley Parks - Turners Hill Park - Park Manager. Head office details: The Berkeley Leisure Group Ltd West Coker House, East St, West Coker, Yeovil BA22 9BW

Declaration

Label	
Signed - Applicant	
Signed - Agent	
Date	2025-10-14

Summary of Form