

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	2589-6916-3379-8439
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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	19 Hamsland Horsted Keynes West Sussex RH17 7DS
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	TH/02/TPO89
Please identify the tree(s) and provide a full and clear specification of the works you want to carry out	Various safety works to trees on Turners Hill mobile home park, suggested via our annual arboriculture & risk assessment survey, carried out by Aspect Arboriculturists. All documentation will be uploaded in support of this application.

Additional Information

ADDITIONALINFORMATION	
For all trees	
Sketch plan clearly showing the position of trees listed in the previous question	Aspect arborculture tree map.pdf (download)
For works to trees covered by TPO	
Please provide a reason why you wish to perform these works	Safety works as per attached report.
Condition of the trees(s)	Yes
Advice/Diagnostics	Aspect arboriculture tree survey and risk assessment report.pdf (download)
Alleged damage to property	Yes
Report/Evidence	
Are you providing separate information?	Yes
Please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your application.	Aspect Ref: 03459 005 TRA 2, 3, 4, 5.03.2026

Authority/Employee

Label	
With respect to the Authority, I am	a member of staff
Please provide details of the name, relationship and role	Michael Tanner Site manager Berkeley Leisure group Turners Hill Park

Declaration

Label	
Signed - Applicant	Michael Tanner
Signed - Agent	Simon Payne
Date	2026-06-15

Summary of Form