

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	7061-8477-2015-1045
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Applicant Details

First name	George
Last name	Curd
Phone number	
Email address	
Confirm email address	
Address	North Lodge Nymans Staplefield Road Handcross

Agent Details

Name	George
Last Name	Curd
Company	National Trust
Address	North Lodge Nymans Staplefield Road Handcross
Phone number	
Email address	

Tree Location

Do all trees stand at the applicant address?	No
Full address/location of the site where the tree(s) stand	Chodds Farmhouse High Street Handcross RH17 6BL

Location Description	Pine tree in the front garden of Chodd's Farmhouse (National Trust Holiday Cottage).
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Ownership of Trees

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

TPO Details

Are you seeking consent for works to tree(s) subject to TPO	No
Are you wishing to carry out works to tree(s) in a conservation area?	Yes
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	We are proposing to fell the tree to ground due to the lean of the tree, seemingly from a high wind event.

Additional Information

Sketch plan clearly showing the position of trees listed in the previous question	Photo 1.jpeg (download)
Please provide a reason why you wish to perform these works	As described on previous page, heavy lean towards building, raised roots and splitting of lower section of the stem. Observed during Tree safety management Surveys
Condition of the trees(s)	Yes
Advice/Diagnostics	
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

With respect to the Authority, I am	a member of staff
Please provide details of the name, relationship and role	

Declaration

Signed - Applicant	
Signed - Agent	n/a
Date	2026-02-13

Summary of Form