

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	2999-0862-5327-5075
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Applicant Details

Your Details	
Applicant Details	
First name	Richard
Last name	Mcbrayne
Phone number	
Email address	
Confirm email address	
Address	FAIRHAVEN ABBERTON FIELD HURSTPIERPOINT WEST SUSSEX BN6 9QD

Agent Details

Agent Details	
Agent Details	
Name	Richard
Last Name	Mcbrayne
Company	No One
Address	Who do you mean by agent?
Phone number	
Email address	richard.mcbrayne@gmail.com

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	

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	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	fell Oak tree in our garden. Reason : The tree is right in the middle of where we would like to build a wall to secure the garden. Currently the garden has very poor fencing that need replacing. The fencing is not an appropriate means of security for the garden due to the level of the garden a retaining wall needs to built to support the garden level, But the tree restricts this from being built. I will replant hedges/trees within the garden to provide privacy from neighbours. Look forward to hearing from you. Many thanks Richard and Samantha

Additional Information

ADDITIONALINFORMATION	
For all trees	
Sketch plan clearly showing the position of trees listed in the previous question	IMG_6015.jpg (download)
For works to trees covered by TPO	
Please provide a reason why you wish to perform these works	Our tree does not have a TPO
Condition of the trees(s)	No
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

Label	
With respect to the Authority, I am	none of the above
Please provide details of the name, relationship and role	

Declaration

Label	
Signed - Applicant	
Signed - Agent	N/A
Date	2024-12-20

Summary of Form