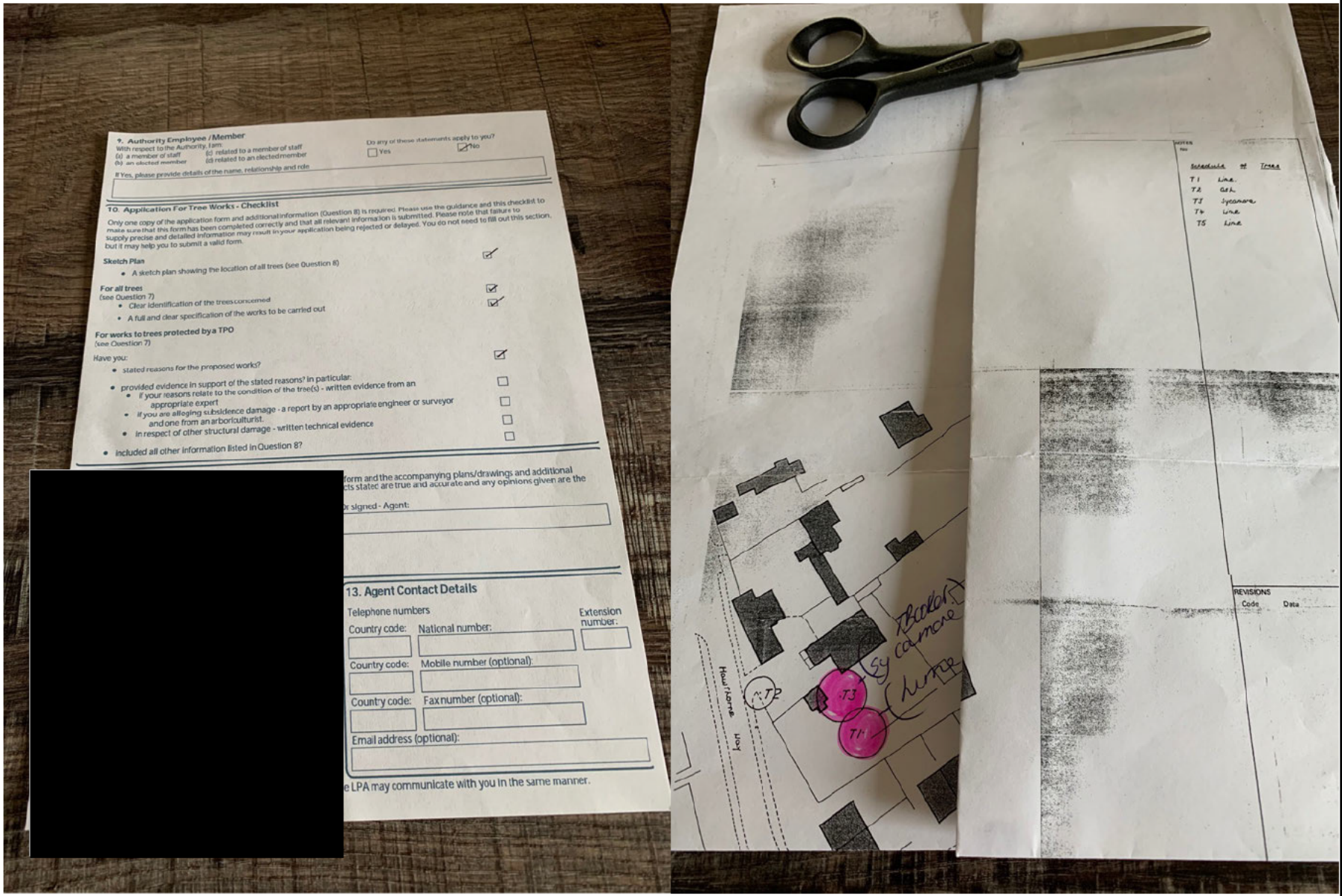


9. Authority Employee / Member

With respect to the Authority, I am:
(a) a member of staff
(b) an elected member
(c) related to a member of staff
(d) related to an elected member

Do any of these statements apply to you? ☐ Yes ☑ No

If Yes, please provide details of the name, relationship and role

10. Application For Tree Works - Checklist

Only one copy of the application form and additional information (Question 8) is required. Please use the guidance and this checklist to make sure that this form has been completed correctly and that all relevant information is submitted. Please note that failure to supply precise and detailed information may result in your application being rejected or delayed. You do not need to fill out this section, but it may help you to submit a valid form.

Sketch Plan ☑
- A sketch plan showing the location of all trees (see Question 8)

For all trees (see Question 7) ☑
- Clear identification of the trees concerned ☑
- A full and clear specification of the works to be carried out

For works to trees protected by a TPO (see Question 7)

Have you: ☑
- stated reasons for the proposed works?
- provided evidence in support of the stated reasons? In particular: ☐
  - if your reasons relate to the condition of the tree(s) - written evidence from an appropriate expert ☐
  - if you are alleging subsidence damage - a report by an appropriate engineer or surveyor and one from an arboriculturist. ☐
  - in respect of other structural damage - written technical evidence ☐
- included all other information listed in Question 8? ☐

[redacted]

form and the accompanying plans/drawings and additional
cts stated are true and accurate and any opinions given are the

r signed - Agent:

13. Agent Contact Details

Telephone numbers

Country code:	National number:	Extension number:

Country code:	Mobile number (optional):

Country code:	Fax number (optional):

Email address (optional):

e LPA may communicate with you in the same manner.

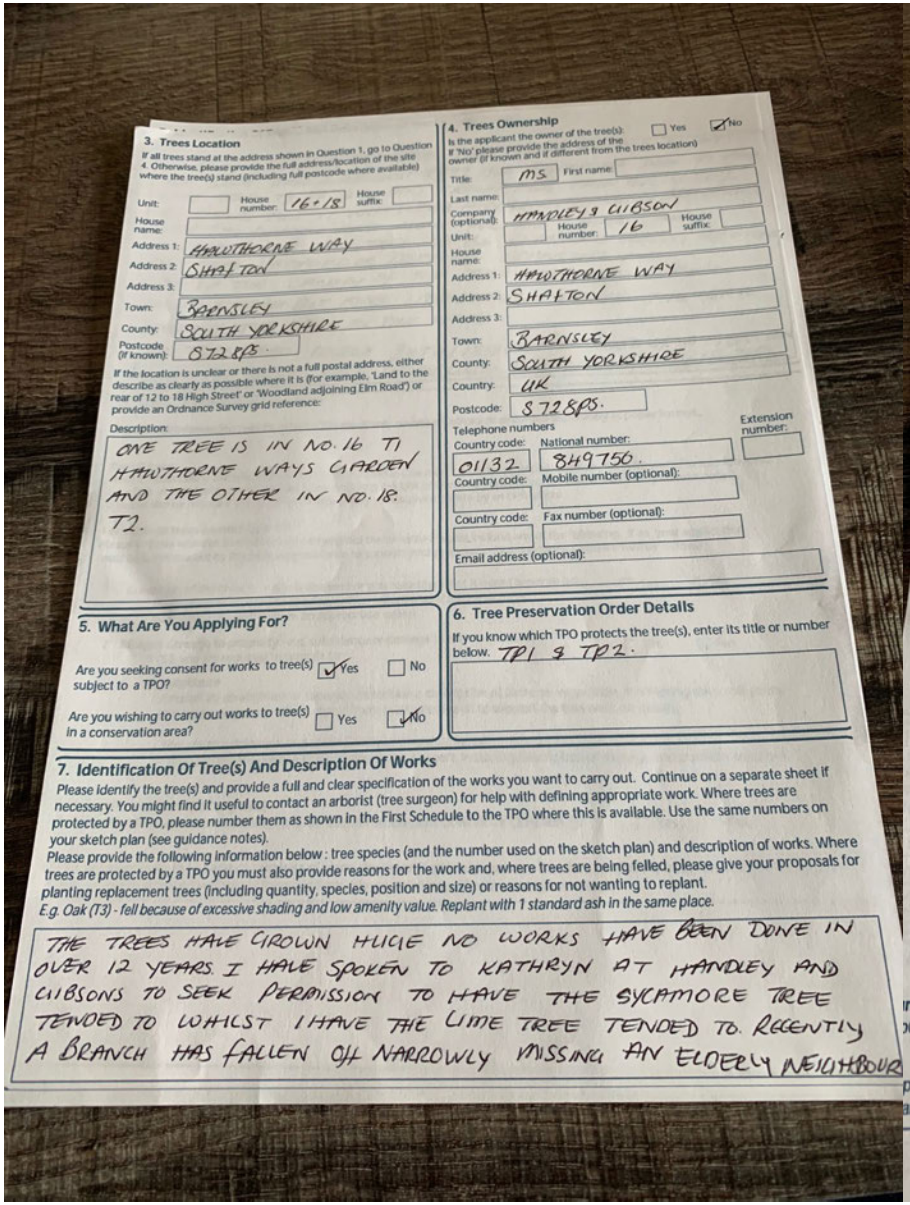
Schedule of Trees
T1 Lime
T2 Ash
T3 Sycamore
T4 Lime
T5 Lime

T3
T4
T5

Hawthorne Way

REVISIONS
Code Date

[redacted]



3. Trees Location

If all trees stand at the address shown in Question 1, go to Question 4. Otherwise, please provide the full address/location of the site where the tree(s) stand (including full postcode where available)

Unit: | House number: 16+18 | House suffix:

House name:

Address 1: HAWTHORNE WAY

Address 2: SHAFTON

Address 3:

Town: BARNSLEY

County: SOUTH YORKSHIRE

Postcode (if known): S72 8PS.

If the location is unclear or there is not a full postal address, either describe as clearly as possible where it is (for example, 'Land to the rear of 12 to 18 High Street' or 'Woodland adjoining Elm Road') or provide an Ordnance Survey grid reference:

Description:

ONE TREE IS IN NO. 16 TI HAWTHORNE WAYS GARDEN AND THE OTHER IN NO. 18. T2.

4. Trees Ownership

Is the applicant the owner of the tree(s): ☐ Yes ☑ No

If 'No' please provide the address of the owner (if known and if different from the trees location)

Title: MS | First name:

Last name:

Company (optional): HANDLEY & GIBSON

Unit: | House number: 16 | House suffix:

House name:

Address 1: HAWTHORNE WAY

Address 2: SHAFTON

Address 3:

Town: BARNSLEY

County: SOUTH YORKSHIRE

Country: UK

Postcode: S72 8PS.

Telephone numbers

Country code: 01132 | National number: 849756. | Extension number:

Country code: | Mobile number (optional):

Country code: | Fax number (optional):

Email address (optional):

5. What Are You Applying For?

Are you seeking consent for works to tree(s) subject to a TPO? ☑ Yes ☐ No

Are you wishing to carry out works to tree(s) in a conservation area? ☐ Yes ☑ No

6. Tree Preservation Order Details

If you know which TPO protects the tree(s), enter its title or number below. TP1 & TP2.

7. Identification Of Tree(s) And Description Of Works

Please identify the tree(s) and provide a full and clear specification of the works you want to carry out. Continue on a separate sheet if necessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are protected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on your sketch plan (see guidance notes).

Please provide the following information below: tree species (and the number used on the sketch plan) and description of works. Where trees are protected by a TPO you must also provide reasons for the work and, where trees are being felled, please give your proposals for planting replacement trees (including quantity, species, position and size) or reasons for not wanting to replant.

E.g. Oak (T3) - fell because of excessive shading and low amenity value. Replant with 1 standard ash in the same place.

THE TREES HAVE GROWN HUGE NO WORKS HAVE BEEN DONE IN OVER 12 YEARS. I HAVE SPOKEN TO KATHRYN AT HANDLEY AND GIBSONS TO SEEK PERMISSION TO HAVE THE SYCAMORE TREE TENDED TO WHILST I HAVE THE LIME TREE TENDED TO. RECENTLY A BRANCH HAS FALLEN OFF NARROWLY MISSING AN ELDERLY NEIGHBOUR

7. Identification Of Tree(s) And Description Of Works continued ...

IT IS MY INTENTION TO HAVE BOTH TREES WORKED ON AT THE SAME TIME. I SUGGEST THAT THE SYCAMORE TREE T1 AND LIME TREE T2 TO 4M AND CROWN AND THIN BY 15-20%. BY DOING THIS IT WILL CLEAR ANY LOW HANGING BRANCHES OVER THE GARDEN AND ALLOW FOR THE SHAPE AND AESTHETICS OF THE TREE'S TO BE RETAINED WHILST REMOVING ANY DEAD, DAMAGED OR DISEASED BRANCHES AND OPEN UP THE CANOPY OF THE TREES TO ALLOW MORE LIGHT THROUGH. BUT MORE IMPORTANTLY REDUCE THE SAIL EFFECT OF THE TREES IN THE WIND.

THE TREES ARE LOVELY BUT IN DESPERATE NEED OF ATTENTION

*NOTE: THE WORKS MUST CROWN CLEAN TO 4M AND THIN BY 15-20%

8. Trees - Additional Information

Additional information may be attached to electronic communications or provided separately in paper format.

For all trees

A sketch plan clearly showing the position of trees listed in Question 7 must be provided when applying for works to trees covered by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation area (see guidance notes). It 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

Please indicate whether the reasons for carrying out the proposed works include any of the following. If so, your application must be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)

1. **Condition of the tree(s)** - e.g. it is diseased or you have fears that it might break or fall: ☐ Yes ☑ No
   If YES, you are required to provide written arboricultural advice or other diagnostic information from an appropriate expert.

2. **Alleged damage to property** - e.g. subsidence or damage to drains or drives. ☐ Yes ☑ No
   If YES, you are required to provide for:

   Subsidence
   A report by an engineer or surveyor, to include a description of damage, vegetation, monitoring data, soil, roots and repair proposals. Also a report from an arboriculturist to support the tree work proposals.

   Other structural damage (e.g. drains, walls and hard surfaces)
   Written technical evidence from an appropriate expert, including description of damage and possible solutions.

ıments and plans (for any tree)

ou providing separate information (e.g. an additional schedule of work for Question 7)? ☐ Yes ☑ No

please provide the reference numbers of plans, documents, professional reports, photographs etc in support of your applica are being provided separately from this form, please detail how they are being submitted.

Sent from my iPhone

If you would rather make this application online, you can do so on our website:
https://www.planningportal.co.uk/apply

PLANNING PORTAL

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

Privacy Notice
This form is provided by Planning Portal and based on the requirements provided by Government for the sole purpose of submitting information to the Local Planning Authority in accordance with the legislation detailed on this form.

Please be aware that once you have downloaded this form, Planning Portal will have no access to the form or the data you enter into it. Any subsequent use of this form is solely at your discretion, including the choice to complete and submit it to the Local Planning Authority in agreement with the declaration section.

Upon receipt of this form and any supporting information, it is the responsibility of the Local Planning Authority to inform you of its obligations in regards to the processing of your application. Please refer to its website for further information on any legal, regulatory and commercial requirements relating to information security and data protection of the information you have provided.

Local Planning Authority details:

BARNSLEY
Metropolitan Borough Council

Planning and Building Control
Economic Regeneration - Place Directorate
Barnsley Metropolitan Borough Council, PO Box 634, Barnsley, S70 9GG
DevelopmentManagement@barnsley.gov.uk
www.barnsley.gov.uk/services/planning-and-buildings

Publication of applications on planning authority websites
Information provided on this form and in supporting documents may be published on the authority's planning register and website.

Please ensure that the information you submit is accurate and correct and does not include personal or sensitive information. If you require any further clarification, please contact the Local Planning Authority directly.

If printed, please complete using block capitals and black ink.

It is important that you read the accompanying guidance notes and help text as incorrect completion will delay the processing of your application.

1. Applicant Name and Address

Title:	MRS
First name:	TINA BOOKER
Last name:	BOOKER
Company (optional):	N/A
Unit:	
House number:	18
House suffix:	
House name:	
Address 1:	HALOTHORNE WAY
Address 2:	SHAFTON
Address 3:	
Town:	BARNSLEY
County:	SOUTH YORKSHIRE
Country:	UK
Postcode:	S72 8PS.

2. Agent Name and Address

Title:	
First name:	
Last name:	
Company (optional):	
Unit:	
House number:	
House suffix:	
House name:	
Address 1:	
Address 2:	
Address 3:	
Town:	
County:	
Country:	
Postcode:	