Planning Services, Adur & Worthing Councils
Portland House,
44 Richmond Road,
Worthing,
West Sussex,
BN11 1HS

Tel : 01903 221065
websites : www.adur.gov.uk or www.worthing.gov.uk
e-mail : planning@adur-worthing.gov.uk

Adur & Worthing councils

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

You can complete and submit this form electronically via the Planning Portal by visiting www.planningportal.gov.uk/apply

ublication of applications on planning authority websites

ease note that the information provided on this application form and in supporting documents may be published on the uthority's website. If you require any further clarification, please contact the Authority's planning department.

ease complete using block capitals and black ink.
u must use this form if you are applying for work to trees protected by a tree preservation order (TPO). (You may also use it to give tice of works to trees in a conservation area).
s important that you read the accompanying guidance notes before filling in the form. Without the correct information, your applicatio tice cannot proceed.

. Applicant Name and Address

itle:	First name: STORE
ast name:	MANAGER
ompany ptional):	DUNELM MILL
nit:	House number: House suffix:
ouse ame:	DUNELM MILL
ddress 1:	CAR PARK
ddress 2:	EASTERN AVENUE
ddress 3:	
own:	SHOREHAM-BY-SEA
ounty:	WEST SUSSEX
ountry:	ENGLAND
ostcode:	BN43 6PO

2. Agent Name and Address

Title:	MR First name: SCOTT
Last name:	COWLAN
Company (optional):	BARLOW INTERIORS LTD
Unit:	1 House number: House suffix:
House name:	1
Address 1:	KEETONS HILL
Address 2:	
Address 3:	
Town:	SHEFFIELD
County:	SOUTH YORKSHIRE
Country:	ENGLAND
Postcode:	S2 4NW

ADUR & WORTHING
PLANNING SERVICES

PLAN	AWDM/ 0974/18
DATE VALID	- 4 JUL 2018

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

nit:	House number: House suffix:
ouse ame:	CAR PARK
ddress 1:	DUNELM MILL
ddress 2:	EASTERN AVENUE
ddress 3:	
own:	SHOREHAM-BY-SEA
ounty:	WEST SUSSEX
ostcode f known):	BN43 6PD

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

escription:

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:	First name: STORE
Last name:	MANAGER
Company (optional):	
Unit:	House number: House suffix:
House name:	DUNELM MILL
Address 1:	EASTERN AVENUE
Address 2:	
Address 3:	
Town:	SHOREHAM-BY-SEA
County:	WEST SUSSEX
Country:	ENGLAND
Postcode:	BN43 6PD

Telephone numbers

Country code:	National number: [redacted]	Extension number:
Country code:	Mobile number (optional):	
Country code:	Fax number (optional):	

Email address (optional):

. What Are You Applying For?

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

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

6. Tree Preservation Order Details

If you know which TPO protects the tree(s), enter its title or numbe below.

TPO 13-53/3/07 (SU)

. Identification Of Tree(s) And Description Of Works

lease 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 ecessary. You might find it useful to contact an arborist (tree surgeon) for help with defining appropriate work. Where trees are rotected by a TPO, please number them as shown in the First Schedule to the TPO where this is available. Use the same numbers on our sketch plan (see guidance notes).

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

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

REMOVE TREE T2 TO INCREASE CAR PARKING SPACES.
SYCAMORE
REPLANT 1NO. SYCAMORE BETWEEN T1 TO T10 TREE LINE.

I. 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.

Documents and plans (for any tree)
Are you providing separate information (e.g. an additional schedule of work for Question 7)? ☑ Yes ☐ No

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

ATTACHED TO EMAIL.

Vith respect to the Authority, I am:

a) a member of staff (c) related to a member of staff

o) an elected member (d) related to an elected member

Do any of these statements apply to you?

☐ Yes ☑ No

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

0. Application For Tree Works - Checklist

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

ketch Plan

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

or all trees

see Question 7)

- Clear identification of the trees concerned ☑
- A full and clear specification of the works to be carried out ☑

or works to trees protected by a TPO

see Question 7)

lave 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? ☐

1. Declaration - Trees

we hereby apply for planning permission/consent as described in this form and the accompanying plans/drawings and additional formation. I/we confirm that, to the best of my/our knowledge, any facts stated are true and accurate and any opinions given are the enuine opinions of the person(s) giving them.

igned - Applicant: [redacted] Or [redacted]

)ate (DD/MM/YYYY): 04-07-2018 (This date must not be before the date of sending or hand-delivery of the form)

2. Applicant Contact Details

elephone numbers

:ountry code: [redacted] National number: [redacted] Extension number:

:ountry code: [redacted] Mobile number (optional):

:ountry code: [redacted]

mail address (optional):

13. Agent Contact Details

Telephone numbers

Country code: [redacted] National number: 07788 977 939 Extensior number:

Country code: [redacted] Mobile number (optional): 0114 2803000

Country code: [redacted] Fax number (optional):

Email address (optional): [redacted]

ectronic communication - If you submit this form by fax or e-mail the LPA may communicate with you in the same manner.