Application for hedgerow removal notice.

The Environment Act 1995.

The Hedgerows Regulations 1997

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

Publication of applications on planning authority websites

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

Please complete using block capitals and black ink.

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

1. Applicar	nt Name and Address	2. Agent Name and Address	_
Title:	First name:	Title: First name:	
Last name:		Last name:	
Company (optional):		Company (optional):	
Unit:	House number: House suffix:	Unit: House number: House suffix:	
House name:		House name:	
Address 1:		Address 1:	
Address 2:		Address 2:	
Address 3:		Address 3:	
Town:		Town:	
County:		County:	
Country:		Country:	
Postcode:		Postcode:	

3. Site Addre	ess Details		11	application Advice		
Please provide t	the full postal address of the			tance or prior advice bee about this application?	_	
Unit:	House number:	House suffix:	authority	about this application?	Yes	s No
House name:				ease complete the follow e given. (This will help the		
Address 1:				on more efficiently). ck if the full contact detai	ls aro not	
Address 2:				and then complete as mu		
Address 3:			Officer r	name:		
Town:						
County:			Referen	ce:		
Postcode (optional): Description of le (must be complete)	ocation or a grid reference. leted if postcode is not kno	wn):	11'	Date (DD/MM/Y)	ion)	
Easting:	Northin		Details o	of pre-application advice	received?	
Description:		9.				
5 Hedgerov	w Removal Notice					
_	e reasons for the proposed r	removal of hedgerow(s	s)·			
Trouse state trie	2 reasons for the proposed i		<i>.</i> ,			
Please state th removed:	ne reference number of the	plan(s) to be submitted	d with this app	lication showing the stret	tch(es) of hedgerov	v(s) to be
Temoved.						
1.			5.			
2.			6.			
3.			7.			
4.			8.			
Please confirm	the length of the hedgerow	v to be removed:				
Please state if th	ne hedgerow to be removed	ں d is less than 30 vears c	old:	Yes	No	
	ce of the date of planting at	•		Yes	☐ No	
	he following questions (one		es'):			
	owner(s) of the freehold of		,	Yes	No	
	tenant(s) of the agricultura	I holding concerned:		Yes	☐ No	
	tenant(s) under the farm be	usiness tenancy concer	rned:	Yes	☐ No	
I am/act for the	utility operator concerned:			Yes	☐ No	

the Local Planning Authority has been submitted. The original and 3 copies of a completed and dated application form: The correct fee: The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The correct fee: The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The correct fee: Th								
information required will result in your application being deemed invalid. It will not be considered valid until all information require the Local Planning Authority has been submitted. The original and 3 copies of a completed and dated application form: The correct fee: The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The correct fee: The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: The correct fee: The corre	6. Planning Application Requirements - Checklist							
The original and 3 copies of a plan which identifies the land to which the application relates drawn to an identified scale and showing the direction of North: 7. Declaration I/we hereby apply for planning permission as described in this form and the accompanying plans/drawings and additional informat confirm that, to the best of my knowledge, any facts stated are true and accurate and any opinions given are the genuine opinions of persons giving them. Signed - Applicant: Or signed - Agent: Or signed - Agent: Or signed - Agent: Telephone numbers Country code: National number: Country code: National number: Country code: Mobile number (optional): Country code: Fax number (optional): Country code: Fax number (optional):	information required will result in your application being deemed invalid. It will not be considered valid until all information required by							
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Country code: Fax number (optional): Country code: Fax number (optional): Country code: Fax number (optional):		Extension						
	Country code: Mobile number (optional):	Country code: Mobile number (optional):						
Email address (optional): Email address (optional):	Country code: Fax number (optional):	Country code: Fax number (optional):						
	Email address (ontional):	Email address (optional):						
	Email address (optional).	Email address (optional).						
10. Site Visit	10. Site Visit							
Can the site be seen from a public road, public footpath, bridleway or other public land? Yes No		r other public land? Yes No						
If the planning authority needs to make an appointment to carry out a site visit, whom should they contact? (Please select only one) Agent Applicant Other (if different fr agent/applicant's decrease)	If Other has been selected, please provide:							
agent/applicant 3 d	Contact name:	Telephone number:						

Email address: