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Trafford Town Hall
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Stretford
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HIGH HEDGES LEGISLATION COMPLAINTS FORM

Use this form to submit a complaint to the Council about a high hedge, under Part 8 of the Anti-Social Behaviour Act 2003. This form should be completed by the person making the complaint, or their representative.

Please use BLOCK CAPITALS and black ink when filling in the form.

YOU MUST PAY A FEE WHEN YOU SEND IN THIS FORM. The current fee is advertised on the High Hedges home page on the Trafford Council website.

The Council will rely on information you provide so please make sure it is clear and accurate.

1.1 Details of the person making the complaint

	Title	Forename	Surname
Name			
Address			
City/Town			
County			Postcode
Daytimo Toloni	oono Numb	or	
Daytime Telephone Number		ei	
Mobile Telepho	ne Numbe	r	
Fax Number			
i ax ivuilibei			
E-mail address			
1.2 Are you co	ntent for us	to contact you by e-m	nail at the address provided?
Yes		No	

1.5 IS this the	address and	ected by the neage you	are complaining about?	
Yes		No		
1.4 If the ans	wer is "no" pl	ease give the reason for	or this below	
1.5 If you are relevant o		bmitting the complaint o	on behalf of the complainant, please provide	
Name	Title	Forename	Surname	
INAITIE				
Address				
				_
				_
City/Town				
County			Postcode	
Daytime Tele	phone Numb	er		
Mahila Talank	aana Numba			_
Mobile Teleph	ione numbe			
Fax Number				
E-mail address				
1.6 Are you c	ontent for us	to contact you by e-ma	ail at the address provided?	
Yes		No		

2 Complaint against

2.1 Name and address of the occupiers of the site where the alleged hedge is growing.

	Title	Forename	Surname	
Name				
Address				
Oit /Tours				
City/Town				
County			Postcode	
Davtime Te	elephone Numi	her		
Dayiiiio 10	alephone rian			
Mobile Tele	ephone Numbe	er		
Fax Numbe	er			
E-mail addr	ress			
2.2 If the he				_
		g on more than one owne	ership please provide further names	s and
addresses:-		g on more than one owne	ership please provide further name:	s and
addresses:- Name	-	Name	Name	
addresses:-	-			
addresses:- Name	-	Name	Name	
addresses:- Name	-	Name	Name	
addresses:- Name Address	-	NameAddress	Name	
addresses:- Name Address Contact	-	NameAddress	NameAddress	
addresses:- Name Address Contact	-	NameAddress	NameAddress	
addresses:- Name Address Contact	the property (i	NameAddress	NameAddress	
addresses:- Name Address Contact 2.3 Is (are)	the property (i	NameAddressContacties) owned by the named	NameAddressContactperson(s)?	
addresses:- Name Address Contact 2.3 Is (are)	the property (i	NameAddressContact	NameAddressContactperson(s)?	
addresses:- Name Address Contact 2.3 Is (are)	the property (i	NameAddressContacties) owned by the named	NameAddressContactperson(s)?	
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addresses:- Name Address Contact 2.3 Is (are)	the property (i	NameAddressContacties) owned by the named	NameAddressContactperson(s)?	

3. Criteria for making a complaint

Please answer these questions:-

About the hedge

3.1 Is the hedge or the or shrubs?	portion that is caus	sing problems, made up of a line of 2 or more trees
Yes	No	
3.2 Is it mostly evergre	en or semi-evergre	en?
Yes	No	
3.3 Is it more than 2 mo	etres in height abov	e ground level?
Yes	No	
3.4 Even though there capable of obstructing		foliage or between the trees, is the hedge still
Yes	No	
3.5 Is it growing on land	d owned by someo	ne else?
Yes	No	
3.6 Are you the owner	or occupier (e.g ter	nant) of the property affected by the hedge?
Yes	No	
If "yes" please confirm	which of the follow	ing applies:
Owner	Occupier	
3.7 Is the property resi	dential?	

If the answer is "no" to any of the questions in this section, the criteria have not been met and so the Council cannot consider your complaint and you should not submit it.

No

Yes

4. Attempts to resolve the complaint

Please describe what you have done to try to settle this matter. Give dates and say what the result was. Please provide copies of any letters that you mention. It is to your advantage in validating this complaint that all dates are at most 3 months prior to the date of this form.

4.1 Verbal request to discuss problem:-	Yes	No	
Date(s)			
Result			
4.2 Written request to discuss problem:-	Yes	No	
Date(s)			
Result			
4.3 Verbal request to hedge owner(s) to try	independent media	ation:- Yes	No
Date(s)			
Result			
4.4 Written request to hedge owner(s) to try	y independent medi	ation:- Yes	No
Date(s)			
Result			
4.5 Have you verbally informed the hedge of	owner of your intent	ion to complain to th	e Council?
Yes No			
Date(s)			
Result			
4.6 Written notification of intention to comp	plain to the Council:-	- Yes	No
Date(s)			
Result			
4.7 Any other means of resolution sought?			

If you have not tried all the above steps, the Council might not proceed with your complaint. It is strongly recommended that all attempts should have been made at least once in writing to ensure validation of the complaint.

5 Grounds of complaint

Please describe the problems actually experienced as a result of the hedge being too tall, and say how serious they are in a legible and coherent way on attached documents which should be clearly marked "GROUNDS OF COMPLAINT".

	uments you have subr licate their attachmen		
location plan on a	n Ordnance Survey b		a photo(s) of the hedge. A tch of both the site where the ge clearly marked on it.
6. Previous Co	omplaints		
	complaint (through su y about this hedge?	ıbmission of a form like	this one) been made to the
Yes	No		
6.2 If you have tic decision letter?	ked "yes" do you kno	w that date and/or refer	rence number of the Council
Date		Reference Number	
6.3 What has cha	nged since the Cound	cil last considered this?	

If nothing has altered, the Council may not proceed with your complaint.

7. Declaration

	I confirm that I have completed as much of this form as I can and that, to the best ny knowledge, the information provided is accurate.
	Tick box to confirm
7.2	I enclose the relevant fee
	Please note the current fee is advertised on the High Hedges home page on the Trafford Council website.
7.3	Please post this form and all enclosures to the address on page one.
7.4	Please ensure that you send a copy of this completed form and all attachments to the person(s) that you have identified in section two at the same time.
	Tick the box to show that you have done this
	Date documents sent