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Development Management Camden Town Hall Extension Argyle Street London WC1H 8EQ

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

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.

| 1. Applicant Name, Address and Contact Details | | | | | | | | | |
|--|---------------------------|----------------|--------------------|-----------------|--------------------|---------------------|--|--|--|
| Title: Ms | First name: | | Surname: | Wood | | | | | |
| Company name | | | | | | | | | |
| Street address: | 45 Highgate West Hill | | | Country Code | National Number | Extension Number | | | |
| | | | Telephone number: | : | | | | | |
| | | | Mobile number: | | | | | | |
| Town/City | London | | Fax number: | | | | | | |
| County: | | | Email address: | | | | | | |
| Country: Postcode: | N6 6DB | | Email address. | | | | | | |
| | cting on behalf of the ap | | No | | | | | | |
| Title: Mrs | | nnifer | Surname: | Byles | | | | | |
| Company name: | Custom Cutters Tree Sp | pecialists Ltd | | | | | | | |
| Street address: | 46 Stanley Road | | | Country Code | National Number | Extension Number | | | |
| | Bounds Green | | Telephone number: | : | 02083657722 | | | | |
| | | | Mobile number: | | | | | | |
| Town/City | London | | Fax number: | | | | | | |
| County: | | | F " 11 | | J L | | | | |
| Country: | United Kingdom | | Email address: | | | | | | |
| Postcode: | N11 2LE | | info@customcutters | s.co.uk | | | | | |

| 3. Trees Locat | ion | | | | | | | | |
|--|--|---|---|--|--|--|--|--|--|
| Please provide the | address of the sit | e where the tree(s) stanc | ds (full address if possible): | | | | | | |
| House: | 45 | Suffix: | | Description: | | | | | |
| House name: | | ' | | Description. | | | | | |
| Street address: | Highgate West Hill | | | | | | | | |
| | | | | | | | | | |
| Town/City: | London | | | | | | | | |
| County: | | | | | | | | | |
| Postcode: | N6 6DB | | | | | | | | |
| describe as clearly | as possible where treet' or 'Woodland | oot a full postal address, e e it is (for example, 'Land d adjoining Elm Road') oi | to rear | | | | | | |
| 4. Trees Owne | ership | | | | | | | | |
| The applicant is th | - | ees | | | | | | | |
| 5. What Are Y | ou Applying F | or? | | | | | | | |
| Are you seeking consent for works to a tree(s) subject to a TPO? Yes No | | | | | | | | | |
| Are you wishing to | o carry out works t | o tree(s) in a conservatio | on area? | Yes No | | | | | |
| 6. Tree Preser | vation Order | Details | | | | | | | |
| If you know which | TPO protects the | tree(s) enter its title or no | umber below | | | | | | |
| | | | | | | | | | |
| 7. Identification | on Of Tree(s) | And Description Of | f Works | | | | | | |
| contact an arboris TPO where this is a Please provide the must also provide and size) or reason | t (tree surgeon) fo available. Use the e following informa- reasons for the wo as for not wanting recause of excessive | r help with defining appr same numbers on your s ation below: tree species ork and, where trees are to replant. e shading and low amenit | ropriate work. Where trees ketch plan (see guidance n s (and the number used on | the sketch plan) and description of works. Where trees are protected by a TPO you ur proposals for planting replacement trees (including quantity, species, position | | | | | |
| | | d arboricultural practice | | | | | | | |
| 8. Trees - Add | itional Inform | ation | | | | | | | |
| by a TPO. A sketcl | n plan is also advis | ed when notifying the LI | | d when applying for works to trees covered nservation area (see guidance notes). icer. | | | | | |
| | nether the reasons | for carrying out the proj | | the following. If so, your application ance notes for further details) | | | | | |
| If YES, y | ou are required to | is diseased or you have for provide written arboric om an appropriate expe | | all: ✓ Yes • No | | | | | |
| | age to property - ou are required to | e.g. subsidence or dama o provide for: | ge to drains or drives. | | | | | | |
| | 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. | | | | | | | | |
| | | al damage (e.g. drains, wa cal evidence from an app | | description of damage and possible solutions. | | | | | |
| Documents and plans (for any tree) Are you providing additional information in support of your application? • Yes • No | | | | | | | | | |
| | | • | nents, professional reports, | photographs etc in support of your application: | | | | | |
| Tree Work Specific | ations for 45 High | gate West Hill | | | | | | | |

002874756

| 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 | |
|--|--|----------------|--|
| 10. Trees - Declaration | | | |

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

 \boxtimes Date:

06/09/2013