21/8



Planning Services Camden Town Hall Argyle Street London WC1H 8EQ Email (enquiries only): env.devcon@camden.gov.uk

Telephone : 020 7974 1911

ax : 020 7974 5713

For office use

Date Pavee

App. No.

Fee

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

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.

You 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 notice of works to trees in a conservation area).

It is important that you read the accompanying guidance notes before filling in the form. Without the correct information, your application / notice cannot proceed.

Applicant Name and Address	2. Agent Name and Address
Title: MA First name: GANETM	Title: First name:
Last name: WELBURN	Last name:
Company BUNNWELL TREE CARE	Company (optional):
Unit: House number: 67 House suffix:	Unit: House number: House suffix:
House name:	House name:
Address 1: BEATTY ROAD	Address 1:
Address 2:	Address 2:
Address 3:	Address 3:
Town: LONDON	Town:
County:	County:
Country:	Country:
Postcode: NG BEX	Postcode:

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3. Trees L	ocation.		4. Trees (wnersnر	ııp		
4. Otherwise	and at the address shown in Question 1, go e, please provide the full address/location o ee(s) stand (including full postcode where	of the site	If 'No' please	e provide t	ner of the tree he address of different fron		<u> </u>
Tanahara da sa	House / A House	se 🗔	Title:	ML	First name	COUN	
Unit:	number: 49 suffix		Last name:	SM1	R		
House name:			Company (optional):				
Address 1:	DOWNSHINE TILL		Unit:		House number:		ouse Iffix:
Address 2:			House name:		· · · · · · · · · · · · · · · · · · ·		
Address 3:			Address 1:				
Town:			Address 2:				
County:			Address 3:				
Postcode (if known):	NW3		Town:				
	n is unclear or there is not a full postal add		County:				
rear of 12 to	clearly as possible where it is (for example, ' 18 High Street' or 'Woodland adjoining Eln		Country:	***************************************			
· .	Ordnance Survey grid reference:		Postcode:				
Description			Telephone r	numbers	historiaa mad himadhaan oo ilii u taha'a kinamai inoo in aadacada amaan	ocontagnina quanti	Extension
			Country cod		onal number:		number:
			Country cod	do: Mah	lla numbar (ar	ntional)	
		T CORNEL CONTROL CONTR	Country coc	Je. IVIOD	ile number (op F B7649	<u> </u>	
			Country cod		number (optio		
Control			Email addre	ss (option	al):		magail
5. What A	re You Applying For?		6. Tree Pr	eservat	ion Order D	Details	
			1	which TPO	protects the	tree(s), enter its	title or number
Are you see subject to a	king consent for works to tree(s) Yes TPO?	No	below.				
Are you wisl in a conserv	hing to carry out works to tree(s) Yes	☐ No					
7. Identifi	cation Of Tree(s) And Description	Of Works					
Please ident	ify the tree(s) and provide a full and clear s	pecification of	the works you	want to c	arry out. Conf	tinue on a separ	ate sheet if
	ou might find it useful to contact an arbori y a TPO, please number them as shown in t						
your sketch	plan (see guidance notes).						
trees are pro	de the following information below : tree s otected by a TPO you must also provide rea	sons for the wo	ork and, where	e trees are	being felled, p	olease give your	
	lacement trees (including quantity, species - fell because of excessive shading and low a						
	AT NEAR BOUNDARY				NOUL	5 BY 3	3%,
14VD .	TRIM BALL FROM PR	openty	TO A	EHM	a Rosa.	0.00	
aven	- AT NOWN LOTT CO	wer o	of GAM	106~/	TELL	-, vows	10
1-2 1	n, 70 know negon	BUATION	AT A	104	JEN LI	ピレビレ	

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 tree by a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservation area (see guidance not it would also be helpful if you provided details of any advice given on site by an LPA officer.	
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	es covered tes).
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 applicat nust be accompanied by the necessary evidence to support your proposals. (See guidance notes for further details)	tion
1. Condition of the tree(s) - e.g. it is diseased or you have fears that it might break or fall: 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. If YES, you are required to provide for: Yes No	
Subsidence A report by an engineer or surveyor, to include a description of damage, vegetation, monitoring data, soil, and repair proposals. Also a report from an arboriculturist to support the tree work proposals.	l, roots
Other structural damage (e.g. drains, walls and hard surfaces) Written technical evidence from an appropriate expert, including description of damage and possible solu	utions.
ocuments and plans (for any tree) re you providing separate information (e.g. an additional schedule of work for Question 7)? Yes	
YES, please provide the reference numbers of plans, documents, professional reports, photographs etc in support of you they are being provided separately from this form, please detail how they are being submitted.	ur application.
	entity-felendrizesiaa-ussa osta oota-eeleläteentäälyeenteentaatatais-eel

O. Authority Employee / Member With respect to the Authority, I am:	Do any of these statements apply to you?
a) a member of staff (c) related to a member of staff b) an elected member (d) related to an elected member	Yes No
If Yes, please provide details of the name, relationship and role	
0. Application For Tree Works - Checklist	by a suidence and this shocklist to
Only one copy of the application form and additional information (Qumake sure that this form has been completed correctly and that all resupply precise and detailed information may result in your application 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 parti if your reasons relate to the condition of the tree(s) - w appropriate expert 	icular: ritten evidence from an
 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 technic	al evidence
• included all other information listed in Question 8?	
11. Declaration - Trees	the state of the s
I/we hereby apply for planning permission/consent as described in the information. I/we confirm that, to the best of my/our knowledge, any	his form and the accompanying plans/drawings and additional y facts stated are true and accurate and any opinions given are the
genuine opinions of the person(s) giving them. Signed - Applicant:	Or signed - Agent:
Date (DD/MM/YYYY):	
(This date must not be before the date	
29/06/2012 of sending or hand-delivery of the form)	
12. Applicant Contact Details	13. Agent Contact Details
Telephone numbers Extension	Telephone numbers Country code: National number: Extension number:
Country code: National number: number:	Country code: National number: number:
Country code: Mobile number (optional):	Country code: Mobile number (optional):
Country code: Mobile number (optional): 07808728099	
Country code: Fax number (optional):	Country code: Fax number (optional):
Email address (optional):	Email address (optional):
Gurnwell & grin con	

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

(Please see guidance notes)