

Planning Services Camden Town Hall Argyle Street

Email (enquiries only): env.devcon@camden.gov.uk

Telephone

Fax

: 020 7974 1911 : 020 7974 5713 For office use

App. No.

Date Payee

Fee

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

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.

1. Applicant Name and Address	2. Agent Name and Address
Title: M2 First name: v	Title: Mr First name: Simon
Last name: KNISHT	Last name: CAUSER
Company (optional):	Company (optional):
Unit: House number: 66	House suffix: Unit: House number: 89 House suffix: A
House name:	House name:
Address 1: BELSIZE P	Address 1: CROFTOOWN RD
Address 2:	Address 2:
Address 3:	Address 3:
Town: LONDON	Town: LONDON
County:	County:
Country:	Country:
Postcode: WWB 4 EH.	Postcode: NW5 1E4.

3. Trees Loc	cation d at the address sh	own in Question	on 1 go to (Question	4. Trees Ov		•	pe(s).	Yes	□No
4. Otherwise, p	please provide the e(s) stand (includin	full address/loo	ation of the	e site	If 'No' please p owner (if know	rovide th	he address o different fro	f the m the trees I		
Unit:	House number:		House suffix:		Title:		First nam	e:		-
House name:					Company (optional):					
Address 1:					Unit:		House number:		House suffix:	
Address 2:					House name:				,	
Address 3:	1				Address 1:					
Town:					Address 2:				X	
County:					Address 3:					
Postcode (if known):					Town:					
	is unclear or there arly as possible wl				County:					
	3 High Street' or 'W dnance Survey gri		ning Elm Ro	oad') or	Country:					
Description:					Postcode:					
THE	ONT O	E (TI) .		Telephone nu Country code		onal number	:		Extension number:
FRA	ONT O	F TH	E		Country code	Mobi	ile number (optional):		
PRY	6 PERTL	7.			Country code	: Fax n	number (opti	onal):		
					Email address	(optiona	al):			
5. What Are	e You Applyin	g For?			6. Tree Pre				er its title	or number
Are you seekir subject to a T	ng consent for wo PO?	rks to tree(s)	Yes	☐ No	below.	-				
Are you wishir in a conservat	ng to carry out wo ion area?	rks to tree(s)	Yes	No						
Please identify necessary. You protected by a your sketch pl Please provide trees are prote planting repla	ation Of Tree(s) and pour might find it use a TPO, please number the following infected by a TPO you deement trees (inclined)	rovide a full and ful to contact a ber them as shotes). ormation below unust also prouding quantity	d clear spec n arborist (town in the v: tree spec vide reasor , species, pe	cification of tree surgeo First Sched cies (and th ns for the w osition and	n) for help with ule to the TPO w e number used ork and, where t size) or reasons	defining where thi on the sk trees are for not v	appropriate s is available ketch plan) a being felled wanting to re	e work. Wher but the sand and description but please give control of the control control of the control control of the control control of the control of the control control of the control of th	e trees ar ne numb on of wor	re ers on rks. Where
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	701		1. 50.							

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Trees - Additional Information		
ditional information may be attached to electronic communications or provided separa	tely in paper f	ormat.
r all trees		
ketch plan clearly showing the position of trees listed in Question 7 must be provided when a	pplying for wo	rks to trees covered
a TDO A skatch plan is also advised when notifying the LDA of works to trees in a conservation	n aroa (coo qui	dance notes)
a TPO. A sketch plan is also advised when notifying the LPA of works to trees in a conservatio	ii area (see gur	dance notes).
would also be helpful if you provided details of any advice given on site by an LPA officer.	irarea (see gur	dance notes).
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9. Authority Employee / Member					
With respect to the Authority, I am:	December 1				
(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?				
(d) related to an elected member	Yes				
If Yes, please provide details of the name, relationship and role					
10. Application For Tree Works - Checklist					
Only one copy of the application form and additional information (Comake 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)	n 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 part if your reasons relate to the condition of the tree(s) - v appropriate expert 					
 if you are alleging subsidence damage - a report by ar 	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?					
11. Declaration - Trees I/we hereby apply for consent/give notice for tree work as described	in this form and the accompanying plans and additional information.				
Signed - Applicant:	Or signed - Agent:				
	1 X				
Date (DD/MM/YYYY):					
6 /5 / 2 (This date must not be before the date of sending or hand-delivery of the form)					
12. Applicant Contact Details	13. Agent Contact Details				
Telephone numbers	Telephone numbers				
Country code: National number: Extension number:	Country code: National number: Extension number:				
Country code: Mobile number (optional):	Country code: Mobile number (optional):				
Mobile Humber (optional):	07939 788 791				
Country code: Fax number (optional):	Country code: Fax number (optional):				
, , , , , , , , , , , , , , , , , , , ,					
Email address (optional):	Email address (optional):				

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

(Please see guidance notes)